

CHEMIST & DRUGGIST

The newsweekly for pharmacy

April 16, 1994

OVER £1M
ADVERTISING
SUPPORT

THE BEST NEWS *for* EARS IN YEARS

Otex[®] Ear Drops contain a unique, DUAL-ACTION formula that not only softens hardened ear wax, but also gently releases oxygen to help it fragment and disperse.

Clinically proven, with 10 years' prescription success, this highly effective formulation is now available WITHOUT PRESCRIPTION.

In order to make sure the "Best News" is really "Big News" we are spending well over £1 million in National Newspapers, TV and radio to tell your customers to ask you, the pharmacist, about Otex.

We are confident that you'll be telling them that Otex's unique dual-action formula is "the best news for ears in years"!



**CLINICALLY PROVEN TO DISPERSE EAR WAX
AND REDUCE THE NEED FOR SYRINGING**

Registered Trademark and Product Licence held by Diomed Developments Ltd., Hitchin, UK. Distributed by DDD Ltd., 94 Rickmansworth Road, Watford, Herts, WD1 7JJ.
• **Ingredient:** 5.0% w/w Urea hydrogen peroxide. • **Directions:** Tilt head, and gently squeeze 5 drops into ear. Leave for a few minutes and then wipe surplus with tissue. Use once or twice daily for approximately 3-4 days or until symptoms clear. • **Indications:** For the removal of hardened ear wax. • **Precautions:** Do not use if sensitive to peroxide, if ear drum is damaged or if any other preparation is being used in the ear. Keep away from eyes. If irritation or pain occurs, or if symptoms persist, stop treatment and consult your doctor. Keep all medicines out of the reach of children. [FOR EXTERNAL USE ONLY] • **Legal Category:** [P] • **Packs:** Bottles of 8 ml (PL 0173/0151), price £2.95

YPG attracts 10 out of 16 to hustings

Lawson: PSNI's discreet diplomat

Numark return to retailer roots

Yorks group in Mawdsley-Brook joint venture

Unichem buy Hall Forster



**In search of the
body beautiful**

£6.5 million

A PROMOTIONAL SPEND TO ECLIPSE ALL OTHERS

Now, the world's first H₂-receptor antagonist, is also available for pharmacy sale as Tagamet 100 and can be ordered now from all major chemist wholesalers.

Tagamet 100 is available in packs of 12 and 24 tablets and is indicated for the short-term symptomatic relief of heartburn, dyspepsia and hyperacidity, as well as for the prophylactic management of nocturnal heartburn.

If you haven't already seen your local SmithKline Beecham Consumer Healthcare representative he/she will be calling soon with details of the eye catching and informative point of sale material which includes window displays and patient advice leaflets.

Backed by a promotional spend of over £6.5 million, including a dramatic T.V. and press campaign, Tagamet 100 will have a major impact on you and your customers.

Stock up now to make sure you gain the maximum benefit from one of the most important POM to P Switches the healthcare profession has ever seen.



Tagamet
100
cimetidine

Product Information

Presentation White alliptical film coated Tiltab tablet containing 100 mg cimetidine. Dosage and administration Adults (incl. elderly), children 16 years and over: Relief of heartburn, dyspepsia, hyperacidity: Two tablets with water when symptoms appear. If symptoms persist for more than 1 hour after the first dose, a second dose may be taken, but no more than 4 tablets in any 4 hours and no more than 8 tablets in any 24 hours. Prophylactic management of nocturnal heartburn: One tablet with water one hour before bed time. In all cases, not to be taken for more than two weeks. If symptoms persist for more than two weeks or recur regularly, a doctor should be consulted. *Not to be given to children under 16 years of age.* Use Short-term symptomatic relief of heartburn, dyspepsia, hyperacidity. Prophylactic management of nocturnal heartburn. Contraindications Hypersensitivity to cimetidine or any of the excipients. Precautions Not recommended in patients: with impaired renal function, hepatic impairment; taking oral anticoagulants, phenytoin, theophylline, intravenous lignocaine, middle aged or older patients with new/changing dyspeptic symptoms, any patients with unintended weight loss, dyspeptic symptoms, because of potential delay in diagnosis of gastric cancer; with a history of peptic ulcer and on NSAIDs, esp. elderly, with compromised bone marrow; in pregnancy and lactation; with any other illness, using any medication, under medical supervision for other reasons. Adverse reactions Diarrhoea, dizziness, rash, tiredness. Gynaecomastia, occasional liver damage, confusional states (usually in the elderly or very ill), all reversible. Rarely thrombocytopenia, leucopenia, agranulocytosis, all reversible. Vary rarely, interstitial nephritis, acute pancreatitis, headache, myalgia, arthralgia, fever, sinus bradycardia, tachycardia and heart block, all reversible, aplastic anaemia, pancytopenia and anaphylaxis. Reports of alopecia and very rarely reports of reversible impotence but no causal relationship has been established at usual prescribed therapeutic doses. Product licence number 0002/0230. Retail Price Tablet (12's) £2.29, (24's) £3.99. Legal category P. Date of preparation 9 March 1994. 'Tagamet' and 'Tiltab' are trademarks. SmithKline Beecham Consumer Healthcare, SB House, Brentford, Middlesex TW8 9BD. Telephone number. 081-560 5151.

SB SmithKline Beecham
Consumer Healthcare

* Tagamet is a registered trademark of Smith Kline & French Laboratories Limited

EDITORIAL

Editor: John Skelton, MRPharmS
Deputy Editor: Patrick Grice, MRPharmS
Contributing Editor: Adrienne de Mont, MRPharmS
Assistant Editor: Jane Feely, PhD, MRPharmS
Business Editor: Anna Evangelini, BSc
Beauty Editor: Sarah Purcell, BA
Technical Editor: Maria Murray, MRPharmS
Reporter: Marianne Mac Donald, MRPharmS
Art Editor: Tony Lamb

Price List Controller: Colin Simpson

ADVERTISING

Advertisement Manager:
 Ian Gerrard
Deputy Advertisement Manager:
 Julian de Bruxelles

Doug Mytton

Production: Alex Craven
Advertisement Director:
 Frances Shortland

PUBLISHER

Ron Salmon, FRPharmS

PUBLISHING DIRECTOR
 Felim O'Brien

Published Saturdays by Benn Publications Ltd. Sovereign Way, Tonbridge, Kent, TN9 1RW
 Telephone: 0732 364422
 Telex: 95132 Benton G
 Facsimile: 0732 361534

Subscriptions: Home £103 per annum. Overseas & Eire £147 per annum including postage. £2.16 per copy (postage extra).

ABC Member of the Audit Bureau of Circulations

un

A United Newspapers publication

YPG attracts 10 out of 16 Council candidates to the hustings 620
 Tweedie and Wood plead prior engagements — nothing heard yet from four

Andrew Taylor takes over chair at Pharmaceutical General Council 621
 New man sees his aim as developing the extended role in Scotland

Hospital pharmacists will move along career spiral rather than climb career ladder 621
 Guild Weekend School hears of how one study sees future developments in the hospital service

J.R. Butler stage PR coup at opening of pharmacy refitted at cost of £100,000 622
 Local MP and 50 influential guests hear how pharmacy can serve local community

Latest health warnings on those social drugs pi-viii
 Pharmacy Update also looks at aspirin and folic acid

In search of the body beautiful ... 637
 C&D looks at all that's new in the bodycare market

The PSNI's discreet diplomat 646
 A profile of PSNI secretary and registrar Derek Lawson

Numark aim to return to their retailer roots 647
 Wholesalers agree to hand share ownership back to retailers

Yorkshire Alliance team up with Mawdsley-Brooks ... 647
 ... while Unichem buy Numark wholesaler Hall Forster

REGULARS

Topical Reflections	623
Medical Matters	624
Counterpoints	627
Business News	647
In the City	648
Coming Events	648
Classified Advertisements	649
Business Link	653
About People	654

Comment

In some ways the £100,000 refit of J.R. Butler's village pharmacy (p622) and its official opening are wholly unremarkable; in others, they are quite extraordinary. Butler bought the 40-year-old pharmacy in 1980. It has the statutory dispensing doctor practice along the road but at present they enjoy a good working relationship. The double-fronted pharmacy is in the company's blue livery and is at once both striking but restrained as befits its Berkshire placement. The interior is light and airy with contrasting dark wood counters and cream gondolas. The shop is well-stocked but not piled high, and pricing is sensible recognising the clientele and the local competition. The dispensary stands out along with the consultation room sign and the display of Helping Hand aids for the disabled in the shop and window. It smacks of a pharmacy that is about servicing the community with its health and beauty needs and a good deal more besides.

Much structural work to the building accompanied the refit (hence the high price tag) but, as was made evident at the opening ceremony, owner Charles Butler is looking to refit more than just his building for the rest of the decade. He is trying to ensure that his staff are trained to cope with the High Street healthcare role identified for pharmacy by

the Government, but also that his pharmacies can service the needs of the community either privately or as required by local health purchasing agencies.

Butler are by no means there, as Charles Butler told the assembled guests, but they are training up and talking to both the local community and the healthcare agencies to assess their needs as supplier and supplied. While that may not be unique, it is remarkable and was exemplified by the wide range of guests at the opening. Top executives of the Oxfordshire RHA and the Berks FHSA rubbed shoulders with leading lights from the local community, doctors and dentists and pharmacists as well as representatives from pharmaceutical companies who supported the evening and who are providing services to the pharmacy. It was quite a coup to assemble 50 such persons and to take the opportunity to expose them to a vision of what pharmacy is now doing in the High Street and what it plans to do, through co-operation with fellow professionals, to meet the researched needs of local customers. That it did so in modest, proper, but fun and informative "party style" was a PR triumph. The Butler spirit and *modus operandi* has much to commend it as a PR role model for community pharmacy generally.

YPG attracts 10 Council hopefuls to hustings

Ten of the pharmacists standing for election to the Royal Pharmaceutical Society Council in May will be appearing at the Young Pharmacists Group hustings on April 24.

Only two have said they cannot attend — Society president Nick Wood will be at the Scottish Pharmaceutical Federation 75th anniversary in Scotland and Allen Tweedie will be abroad.

The YPG has yet to hear from Professor Ian Jones, Dennis Millington, Dr Hopkin Maddock and Greg Sergeant.

However, anyone turning up to the St John's Hotel in Solihull at 2pm can expect to hear from

Peter Curphey (Isle of Man), Peter Joshua (Guildford), Linda Stone (Solihull), David Sharpe (London), Gordon Appelbe (London), Hassan Argomandkhah (Liverpool), Clive Murray (Tipton), John Carr (Barton-under-Needwood), Alison Blenkinsopp ((Leeds) and Patricia Hoare (Beaconsfield).

The hustings are being held in collaboration with the Society's West Midlands Region. Overnight accommodation is available at the Swallow Hotel, Birmingham, for £70 (evening meal, bed, breakfast and transport to the hustings in Solihull). Details: Mark Koziol on 021-233 0708.

Guild Council looks to MSF in the 21st century

The Guild of Hospital Pharmacists will be consulting members over the next 15 months on a discussion document, "MSF into the 21st century", which looks at the future of the MSF parent union.

Another important issue covered at the last Council meeting was the contracting out of pharmacy services. Any such process should take account of:

- the needs of the customers
- objective professional standards against which hospital pharmacy services are measured
- continuous improvement of quality
- the model used should meet local needs consistent with core quality standards
- service managers should only commit management time to review exercises which will advance knowledge and not undertake reviews which confirm extant learning
- any model of service which reduces the integration of the hospital pharmacy is inherently flawed, and any model of service which links financial reward for the supplier to the cost of medicines supplied is also flawed.

The submission for this year's pay award has been finalised and forwarded to management. Staff and management will meet on May 25 to discuss the pay award.

The Guild has been invited to participate in the Royal

Pharmaceutical Society's Working Group on Standards in Hospital Pharmacy and will be represented by the new president Arthur Williams and professional secretary Ian Simpson.

Mr Bill Brookes has been made an honorary vice-president of the Guild. He is one of only four people to be given this honour.

Which? looks at EPO costs

Mail order evening primrose oil can save you money, says the April *Which? Way to Health*.

Health Post capsules cost 5p for 500mg compared with Efamol's 11p a capsule, the magazine explains. And although the big companies say that cheaper brands can contain little or no GLA, the Consumers' Association laboratory tests found this not to be the case.

All the capsules tested — two big brand names and four mail order brands — had GLA levels measuring between 7.6 to 9.3 per cent.

Which? Way to Health also tells readers that prescriptions can save money. Three month's supply of Epogam would probably go on one prescription and cost £4.75. The same amount of GLA bought over the counter as Efamol would cost £121.80.

Leicester campaign to ban tobacco advertising

Leicestershire pharmacists are campaigning for a ban on tobacco advertising.

The RPSGB's Leicestershire Branch has agreed to encourage members to write to their MPs asking them to back the Private Members Bill going through Parliament. Pharmacists have also been asked to display

material on giving up smoking.

The branch decided that this was one of the key "Health of the Nation" targets in which pharmacists could play a part.

Effie Smith, a pharmacist at Leicester Royal Infirmary, told *C&D* it was too soon to say how many pharmacists were playing an active part in the campaign.

Tesco fail in Cirencester contract bid

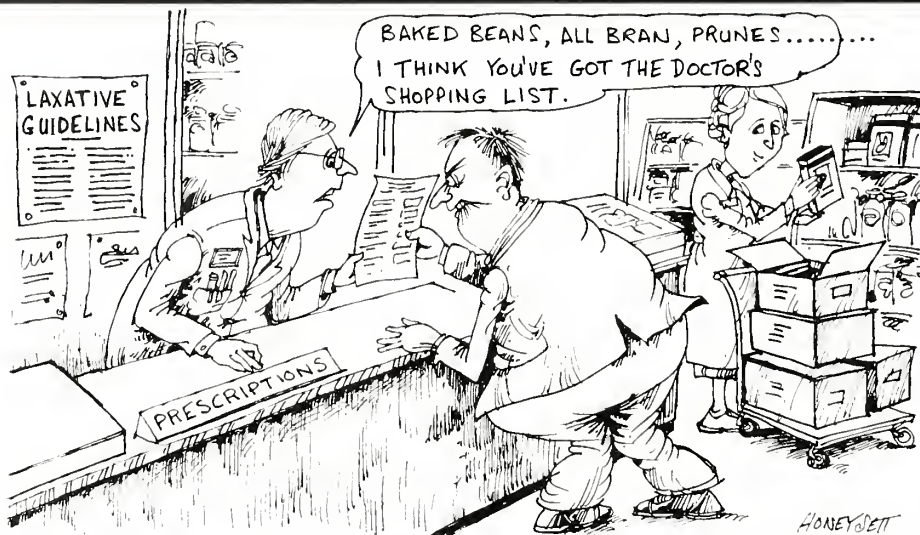
A contract application for an in-store pharmacy at a Tesco superstore in Cirencester has been turned down by Gloucestershire Family Health Services Authority (*C&D* January 22, p117).

Stephen Gollidge, chief executive at the FHSA, told *C&D* that a Tesco pharmacy was neither "necessary or desirable".

Secretary of Gloucestershire Local Pharmaceutical Committee Dr Christopher Dunn agrees: "There is an uncertainty of access [to the pharmacy] except by car and there is also potential damage to rural areas."

One pharmacy which the LPC fears could be affected is the Laurels Pharmacy in South Cerney. Proprietor Dr Neil Doggett says a Tesco's pharmacy "would inevitably affect the services we can offer". He believes there is an adequate number of pharmacies already in Cirencester.

Tesco's pharmacy controller Mike Rudin says: "We are disappointed but we are taking it on to the appeal stage."



Avon FHSA introduces laxative guidelines

Avon Family Health Services Authority has introduced guidelines for both pharmacists and GPs to help them treat constipation in an attempt to reduce the area's drugs' bill.

Avon FHSA medical advisor Dr Elizabeth Robinson told *C&D*: "Lactulose is routinely used throughout nursing homes and was the leading laxative. It works well, but it's very expensive."

GPs and pharmacists have

been provided with a laminated card which outlines treatment. As well as giving advice on general measures, it also advises on laxatives for treating short-term, chronic and opiate-induced constipation. Separate sections deal with constipation in children and during pregnancy.

A reminder at the foot of the card says: "Lactulose: very expensive. Inappropriate for short-term use as it takes one to

three days to work. Shows no practical superiority over other laxatives in chronic use."

Since the card went out about two months ago, there has been no noticeable change in prescribing habits within the community. Samantha Bailey, pharmacist at DJ and KR Fife, Clevedon, says: "We are still doing a lot of lactulose, not only from nursing homes, but also from the general public."

Andrew Taylor elected new SPGC chairman

Andrew Taylor has been unanimously elected chairman of the Scottish Pharmaceutical General Council. He succeeds Graeme Millar, who left office to become chairman of the Royal Hospital for Sick Children NHS Trust.

As chairman, Mr Taylor's main concern is to develop extended roles for Scottish pharmacists. "The recently concluded settlement for 1993-94 gives Scottish contractors a suitable basis from which to achieve future developments of the service," he says.

Graeme Millar says: "I am delighted to see Andrew in this position. He has gained a lot of experience on the Standing Committee. I think he is a very competent individual and I have no doubt that he will be able to take up where I left off."

Mr Taylor is currently chairman of the Argyll and Clyde

Area Chemist Contractors Committee and has been a member of the Standing Committee for the past five years. Previously a director of Ayrshire Pharmaceuticals until it was bought over by Lloyds Chemists, Mr Taylor owns two pharmacies in the West of Scotland.



NI figures

Northern Ireland's January payments reveal that 1,556,524 prescriptions were dispensed through chemists and appliance contractors. The gross cost was £8.88 per prescription while the net ingredient cost was £7.33.

Asthma week

Childhood asthma will be the theme of Asthma Week, to be held from October 10-16. The National Asthma Campaign, which organises the week every year, will concentrate on the poor quality of life that young victims can suffer.

Paracetamol dose

The Consumer's Association has clarified the danger dose for paracetamol (C&D last week, p581). Taking 15 or 16 500mg tablets in one day could cause fatal liver damage. The CA stresses that paracetamol is safe if taken at the recommended levels (4g for adults).

Residential care

The total number of staffed residential homes for adults in England increased by 2 per cent to 16,300 between 1992 and 1993, according to Government figures. However,

the number of places and residents remained almost static at 334,000 and 288,000 respectively.

Special HA

The Centre for Applied Microbiology and Research at Porton Down in Wiltshire is to become a Special Health Authority, the Government has announced.

Community care

One year on, and community care is "beginning to deliver the goods and improve the care for elderly and vulnerable people," says John Bowis, Parliamentary Secretary at the Department of Health.

Organ donation

Increasing donor rates continues to be a Government priority, says Tom Sackville, Parliamentary Secretary for Health, following a report from the King's Fund Institute. *A Question of Give and Take* reveals that the number of relatives refusing donations is falling.

Sheep dip controls

Regulations restricting the supply of organophosphorus sheep dips to people with a certificate of competence came into effect on April 1.

Guild of Hospital Pharmacists Weekend School

A spiralling future for hospital pharmacists

Around 300 people attended the Guild of Hospital Pharmacists' National Weekend School held over last weekend at the University of Liverpool

Pharmacists in the future will move along a career spiral rather than climbing a career ladder, predicts Stuart Anderson, a lecturer in pharmacy practice at the School of Pharmacy, University of London.

"Careers will be more diverse and pharmacists will be required to work more flexibly without additional incentives," he said. Mr Anderson was leading workshops on "Providing a pharmacy service. What do our customers want/need?" and "Skill mix in hospital pharmacy".

An Institute of Manpower Studies report on skill mix in hospital pharmacy commissioned by the Department of Health recommended a flatter career structure for hospital pharmacists with the loss of senior grades G and H, a loss of officer posts and an amalgamation of the remaining grades to A/B, C/D and E/F.

The authors of the report envisaged a largely clinical role for pharmacists with minimal supply and dispensing functions,

minimal management and supervision, and fewer posts.

Mr Anderson told the delegates that jobs will continue to be lost in the hospital pharmacy sector. However, he sees a growth area in polyclinics where there will be greater opportunities to work directly with GPs and FHSAs on formular development.

Within the new structure of the NHS, hospital pharmacy may face competition from a variety of organisations who may bid to provide all or part of the service.

Competitors could include other hospital trusts, private hospitals, pharmaceutical wholesalers, a local pharmacy, national pharmacy multiples, or even consortia of former hospital services managers with capital from their redundancies to invest.

Competitors might offer a better service by opening 8am-8pm, seven days a week. They could reduce drug costs by contract purchasing, reduce staff costs by having a minimal number of training posts and

decreasing study leave.

On a more positive note Mr Anderson outlined competitive advantages hospital pharmacist have — knowledge and skills, knowledge of the services provided by the directorate and their needs and knowledge of the staff and computer systems.

New group

Responding to the changes occurring within the NHS and the changing role of pharmacists, the Guild held an inaugural meeting of a Management Interest Group at the Weekend School.

The aims of the group include advising Guild Council on all management issues affecting hospital pharmacy, arranging meetings on management related topics, organising research into pharmacy management and supporting the training of pharmacists in management.

It is the first specialist interest group and the Guild hope to develop further specialist groups.

The Great Debate goes on

On Sunday morning, "The Great Debate" took place followed by a delegate vote.

Sandy Harper, principal pharmacist clinical services, Bath, proposed the motion "This house believes pharmacy services provide value for money" and was opposed in the matter by Peter Matthews, general manager, Sandwell District General Hospital.

Mr Harper suggested that the pharmacy department should be regarded in the same way as the microbiology or clinical biochemistry departments where the technicians carry out much of

the routine work and the professionals are there to advise the clinicians.

Mr Matthews argued from a management point of view: "Hospital pharmacists are an expensive liability and over-specialisation leads to a lack of flexibility."

He suggested that hospital pharmacy's greatest problem is also its virtue — developing and encouraging the pharmacy technicians.

The majority of delegates, not surprisingly, joined with Mr Harper and voted in favour of the motion.

Broad spectrum of guests witnesses Butler opening

Liberal Democrat MP David Rendel officially opened J.R. Butler's "recycled pharmacy" in Mortimer Common, Berkshire, last week at a party attended by some 50 guests drawn from the health professions, Oxfordshire Regional Health Authority, Berkshire Family Health Services Authority, and the local community.

Mr Rendel complimented the firm on the quality of the refit and the healthcare concept behind it. "It is wonderful to hear of a company concentrating on train-

ing its staff in a recession."

The £100,000 refit took three months and features an open, raised dispensary with adjacent, screened consultation area; the Butler Helping Hand range of aids for the disabled; space for diagnostic testing; an enlarged sales area; store room and staff room; and a new shop front.

Managing director Charles Butler outlined his three-point plan to provide more training, to form closer working relationships with other healthcare workers and to introduce more

services for special needs groups.

Later this year, after additional training, staff will look at developing customer services:

- to provide for the housebound
- to introduce a wheelchair/equipment rental service as an extension to Helping Hand
- to study how to assist the blind, the partially-sighted and those for whom English is not a first language with reading medicine labels and with communicating.

Mr Butler described company commitment to training being written into job descriptions and contracts. Later this year, selected employees will start HNCs in retailing techniques with J.R. Butler hoping to take up their full allocation of places on the Medicine Counter Assistant courses.

"We are determined to make the future both optimistic and fruitful by bringing forward initiatives and new services for the community," he said.

MP David Rendel (left) pictured after officially opening the £100,000 refit of J.R. Butler's Mortimer Common branch with (from the left) manager Dorothy Conolly, deputy md Lawrence Garnett and md Charles Butler

Dispatches to focus on baby drinks

Next week's "Dispatches" (April 20, 9.00pm, Channel 4) targets baby drinks manufacturers.

The programme examines the evidence that fruit-flavoured, sugared drinks and herbal teas can cause tooth decay in children. The producers say companies like Smithkline Beecham and Cow & Gate have refused to defend their products on-screen.

"Yes it's true, if that's how they want to put it," comments Alan Chandler from Smithkline Beecham. He says that the company made a number of approaches and suggestions regarding what they wished to do on the programme, but these were not acted upon.

Cow & Gate were approached originally about participating in a Channel 4 programme concerning infant nutrition. This programme was postponed and a new one slotted in "about subjects which could be the subject of litigation", says Elon Newton at Cow & Gate. "We are being put in the dock by an investigative programme, but no court case has been announced."

According to Channel 4, there are over 1,000 legal actions pending against a number of baby drinks manufacturers.

BPSA Conference

Optimism abounds ...

If Barry Andrews, managing director of Moss Chemists, were a pharmacy student today he would be "fantastically optimistic".

Mr Andrews was replying to a question put to him at the BPSA's Questions & Answers session, chaired by Adrian Brown, clinical pharmacy manager at Aintree Hospitals NHS Trust.

When asked if they were students today would they be optimistic, the panel (whose other members were RPSGB vice-president Ann Lewis; Wirral regional pharmaceutical officer Keith Farrar; and John Shadwell, chief pharmacist at Zeneca Pharmaceuticals) were in unanimous agreement.

Barry Andrews said: "The changes occurring in the NHS and within community pharmacy offer tremendous opportunities."

Keith Farrar said there was no reason for pharmacy students not to succeed and the only barriers were themselves. He would like to see pharmacists as a prescribing profession in the next decade.

When John Shadwell qualified he found community pharmacy unattractive — a "marketing and sales" job. "Now it is becoming what I always hoped it might be

The "morning after" pill, or the YUPZE method of contraception, should not be deregulated, said Sharon Johnson, BPSA secretary. Although she believes pharmacists are adequately trained to deal with the counselling of OTC sales, she is worried that "if it goes to P it will encourage lax attitudes among teenagers towards barrier contraceptives and encourage unprotected sex".

Emma Doyle, BPSA prereg representative, seconded the motion, saying: "If it's made OTC, it will simply become post-coital and girls can take it every morning if they wanted to."

Citing the incidence of nausea and vomiting as ranging from 20-60 per cent, Ms Doyle also pointed out that patients are often provided with prescription anti-emetics which counter this

— patient care, medicines, professional advice, not retailing."

Ann Lewis felt pharmacists, could make "a wider contribution outside their traditional areas".

The panel was also questioned about the postponement of the Community Pharmacists Group by the Pharmaceutical Society.

Barry Andrews said he regarded it with "the greatest dismay but no surprise". John Shadwell found it "difficult to

Deregulation of morning after pill condemned

Proposals to deregulate the "morning after" pill to P status were condemned by the British Pharmaceutical Students Association meeting in Liverpool last week

side-effect.

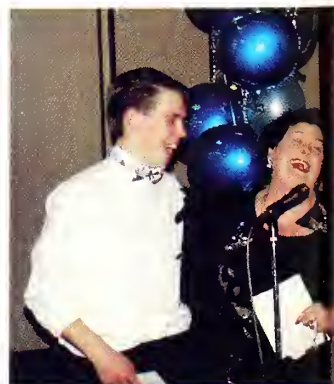
Lynne Brown (ex-Sunderland) disagreed: "Anti-emetics are not the answer to vomiting on Schering PC4. Doctors do not supply an extra dose if there is a problem with sickness."

Julie Bennonson (Nottingham) pointed out that women prescribed PC4 were required to go back for a medical check-up and pregnancy test; this would not happen in pharmacies.

Concluding the debate, Sharon

Johnson said: "We are not saying that pharmacists are not capable of selling this, but there are social implications with people using it flippantly as an alternative form of contraception."

Following a vote, the motion was carried by a small majority.



Joyce Kearney (APS) with Robert Ford, a first year student and winner of special prize in the APS/Berk presentation awards

Scunthorpe GPs target temazepam

Over 95 per cent of Scunthorpe GPs have agreed to a voluntary ban on prescribing temazepam capsules amid reports of escalating abuse of the drug.

They join 400 other GPs in the Humberside area who already operate such a ban, only prescribing the tablet formulation. The FHSA says this gives almost blanket coverage of the region.

The ban in Hull and Grimsby has resulted in an 84 per cent drop in temazepam capsule prescribing, a 7 per cent drop in other temazepam scripts and a 6 per cent reduction in all benzodiazepine prescribing.

"Clearly the patients have co-operated, and pharmacies no longer need to stock the capsules which means far fewer are in circulation," says Dr Brian Compton, director of medical advisory services at Humberside FHSA.

The Home Office is expected to make a decision on temazepam rescheduling soon, but as yet there is no word of any move.

LPCs fill vacancies

Concern over the seemingly large number of local pharmaceutical committees with substantial contractor vacancies after the recent elections has proved to be unfounded.

Alan Phillips, Durham LPC secretary, says: "I don't think there is any disillusionment or any political statement being made. It's just a case of people not getting themselves together." Durham has five vacancies. However, three members of the previous LPC are being co-opted.

Hampshire has five vacancies, but the LPC has since written to 116 independent contractors, asking for volunteers to be co-opted and has received eight or nine positive responses.

NPA aims for advert deal

The National Pharmaceutical Association is aiming to put together a deal with manufacturers which allows their branded products to be advertised by independent community pharmacists at a local level.

This is in response to the series of Boots' Press advertisements for new OTC products. The RPSGB's law department has received several complaints about the adverts, advertising in this way does not contravene the Code of Ethics.



Young turks cannot turn back the clock

The impatience of young pharmacists who would like to practise in community pharmacy, but are unable to do so easily as proprietors, is understandable. Recently this impatience has been reflected in a small groundswell of opinion which has advocated a return to the good old days of contract free-for-all.

Sympathy and agreement are not, however, mutually interchangeable and, as a past recipient of the leapfroggers' attentions, I cannot support the madness of uncontrolled practice.

It has been argued that pharmacy's clients should be allowed access to as many pharmacies as the free market will allow, but while we are paid largely on a piece-rate system this will inevitably result in clustering around large medical practices with more distant communities being deprived of pharmaceutical services.

If pharmacy was a first-party profession, geographical position would not be so important and the client could exercise free choice. However, we are dependent on the issuing of prescriptions by the medical profession and therefore the closer a pharmacy can be positioned to their practices the more NHS business they tend to be able to generate.

Thankfully, the emphasis of our NHS payment structure is

moving away from the numbers game towards service and there is now recognition that it is vital for pharmacies to be rationally distributed throughout the community. But, in order for this process to be maintained, the substantial payments which have to be made to ensure the viability of essential pharmacies must be supported by contract control.

The argument of the young and impatient is compelling, but the solution is wrong. We have to accept that the opportunities of yesterday cannot be recreated in the climate of today and, much as I would like to see one pharmacist, one pharmacy, this will never happen. Employee status for pharmacists is increasing, but the frustrations of the multiple yoke should be tempered by an increasing activity among the pharmacist employees of multiples to become a part of the professional decision-making process within that company.

There are still opportunities for the independent pharmaceutical entrepreneur and with effort these opportunities will improve. In the community, family health service authorities are being charged with identifying areas where new pharmacies would be desirable, and in the more rural areas there are gaping holes in the pharmaceutical umbrella.

The venom of the frustrated might be better aimed at Dr Mawhinney, Minister for Health, who by his written parliamentary answer on March 18, has deliberately avoided the question of the legitimate rights of community pharmacists to provide pharmaceutical services in so-called rural areas.

We must stop our internecine squabbles because here is where the real battle should be fought: against a Minister for Health who can justify a system which compels patients in many country towns to enjoy the incompleteness of doctor dispensing while depriving them of the proper pharmacy services the profession is crying out to provide.

Careful not to put your foot in it...

It is always pleasant to read of private success in community pharmacy and last week's feature on Moss Chemists' branch in Llandudno, despite its present multiple ownership, is really based on the success of its previous private ancestry.

There must be many pharmacists (including myself) envious of this pharmaceutical emporium and all credit to Moss for seizing the opportunity to further extend their professional and commercial opportunities.

The only cloud on the horizon is a problem I have raised before. In their Llandudno refit, Moss are collaborating with Scholl to provide a chiropody treatment service which will involve the supply of display material and equipment by Scholl. The staff, including a chiropodist who is being funded by Moss on a one-year chiropody course, are to be employed by Moss.

The National Pharmaceutical Association and the Health Education Authority publication entitled "Health Promotion and the Community Pharmacist" quite clearly states that "by giving out a leaflet, you are personally endorsing the information contained in it". This principle is even more important when we are offering other professional services to the general public because, by association, we as pharmacists are endorsing those services.

Chiropody, unlike pharmacy, is not a closed profession, so extreme caution has to be exercised when recommending any practitioner to the public. In the absence of any controls over the use of the title, I have always taken the course of recommending that patients seek advice from a state-registered chiropodist since that is the only qualification accepted by the NHS.

State registration involves a three-year, full-time degree course and on leaving college these graduates are available for employment on the open market. I am surprised that Moss are spending money training their own chiropodists on a one-year course when they could immediately employ one who was state-registered.

Topical REFLECTIONS

Medical matters

Lederle claim major treatment benefits for lansoprazole

Lederle claim that their second generation proton pump inhibitor Zoton (lansoprazole) offers superior healing rates in the treatment of gastric-acid related disorders compared to ranitidine and omeprazole (for Data Sheet see C&D last week p584).

It also has an excellent safety profile — over 2 million patients have been treated worldwide to date — and offers substantial financial savings over existing therapies, says the company.

Lansoprazole, at a standard daily dose of 30mg, will heal over 75 per cent of duodenal ulcers after four weeks of therapy, with most patients being endoscopically healed after two weeks. Some 85-95 per cent of patients with reflux oesophagitis will be healed after eight weeks with symptomatic relief being achieved more quickly than with either ranitidine or omeprazole.

Lansoprazole has been shown to provide more effective acid suppression over 24 hours than omeprazole (for that period stomach acidity remains above pH3 for 72 per cent of the time compared to only 61 per cent for omeprazole).

A study of 144 duodenal ulcer patients comparing lansoprazole with omeprazole at standard doses showed healing rates after two weeks at 74 per cent and 58 per cent respectively. After four weeks, the healing rates were 94 per cent in each group.

A similar study over eight weeks in patients with reflux oesophagitis showed 92 per cent remission for patients on lansoprazole compared to 53 per cent with ranitidine. A further trial, comparing it to omeprazole, showed no significant difference in terms of healing at eight weeks, but patients on lansoprazole experienced less heartburn after four weeks.

The drug appears to be well tolerated: headache (3.8 per cent) and diarrhoea (2.9 per cent) are the most frequently-observed side-effects. Incidence of these in the elderly is no greater than in the general population.

Lansoprazole is a substituted benzimidazole which has 30 per

cent greater bioavailability than omeprazole, according to Lederle medical director Dr Peter Brock. The molecule is a highly lipophilic pro-drug which moves rapidly into the parietal cells in the wall of the stomach. While omeprazole only binds to two proton pump receptor sites, lansoprazole binds to three, giving enhanced activity.

The molecule also has marked bactericidal effects *in vitro* against *Helicobacter pylori*, the bacterium with which 95 per cent of duodenal ulcer patients are infected. The MIC 90 per cent (µg/ml) for lansoprazole is 6.25 compared to 25 for omeprazole and 12.5 for bismuth.

A regime of clarithromycin 500mg three times a day for a fortnight and lansoprazole 30mg twice daily for four weeks gives an

eradication rate of 69 per cent. Such a combination may provide a more acceptable alternative to the current unpalatable triple combination therapy.

Lederle estimate that some 13.5 million patients suffer with acid-related disorders annually in the UK. Of these, 30 per cent can be treated using existing OTC treatments (cimetidine, alginates, etc) and 5.54 million are seen by GPs, leaving 4 million patients untreated.

Including the cost of the drug, the GP consultation, endoscopy and biopsy, Lederle say the treatment cost using Zoton works out at £64.30 compared to £77.65 for omeprazole and £122.31 for ranitidine. Annually this amounts to savings of £53m against omeprazole and £233m over ranitidine.

Advance in transplant management

Sandoz Pharmaceuticals hope that Neoral, a new preparation of cyclosporin with improved absorption, will be available in the UK within the next 12 months.

Neoral is absorbed more consistently than existing Sandimmun formulations, the Third Annual Congress of Cyclosporin heard recently.

Professor Barry Kahan, the director of immunology and organ transplantation at the University of Texas Medical School, explained: "Graft rejection is a major risk for transplant patients. With poor absorption [of cyclosporin] the likelihood of an early rejection is much greater. The improved absorption of Neoral should reduce rejection and patient morbidity."

Milk linked to bone density

The consumption of milk should be encouraged during childhood and adolescence as it may help prevent osteoporotic fractures, say the authors of a study published in the latest *British Medical Journal*.

Over 250 women aged between 44 and 74 took part in the study to discover the effects of historical milk consumption on current bone mineral density at the hip and spine. Low bone density is an important predictor of future fracture risk. The treatment of fractures currently costs the National Health Service about £600 million a year.

Women were asked to recall their average milk consumption up to the age of 25. Researchers found that there was a consistent upward trend in BMD at all sites with increasing milk consumption before the age of 25.

The authors admit that the observed differences in bone mass between the most and least frequent milk consumers are modest and a longitudinal study is required for confirmation.

It is estimated that 40-60 per cent of children's calcium intake comes from milk. However, milk consumption among children and young adults has been declining steadily since the mid-1970s.

Script Specials

Colour change

Evans Medical have altered the appearance of Fefol, Fefol Vit, Feospan, Fefol Z and Fesovit Z. The red pellets in the Spansules have now been changed to a brown colour following a switch from FD2C red to Ariavet red oxide. **Evans Medical Ltd. Tel: 0372 364000.**

Opticrom reminder

Fisons say all pharmacists should dispense and endorse all prescriptions for Opticrom eye drops with 13.5ml to prevent the possibility of misunderstanding on reimbursement between the prescription and OTC packs. Sodium cromoglycate aqueous eye drops 2 per cent are now category D in the Drug Tariff so if prescriptions need to be filled with Opticrom they should be endorsed with Fisons and the pack size of 13.5ml. **Fisons Pharmaceuticals. Tel: 0509 634000.**

Cardilate MR

Cardilate MR 20mg from Norton Healthcare are modified release tablets containing 20mg nifedipine. The tablets are blister-packed in boxes of 100 (basic NHS price £18.35). **H.N. Norton & Co Ltd. Tel: 0279 426666.**

Prescribable cromoglycate

Novex Pharma have introduced two new sodium cromoglycate preparations which they will be promoting strongly to GPs.

Vividrin eye drops (13.5ml £5.10 basic NHS) and Vividrin nasal spray (15ml £5.45) offer savings over established brands, the company says.

Vividrin eye drops contain 2 per cent w/v sodium cromoglycate preserved with 0.01 per cent benzalkonium chloride. They also contain disodium edetate, polysorbate 80 and sorbitol. The product is licensed as a POM for the prophylaxis and treatment of acute or chronic allergic conjunctivitis and vernal keratoconjunctivitis.

The nasal spray also contains 2 per cent sodium cromoglycate, in a similar formulation. It is claimed to have similar efficacy to preparations containing sodium cromoglycate 4 per cent. It is licensed as a P medicine for the prevention and relief of seasonal and perennial allergic rhinitis. The distributors are Farillon Ltd. **Novex Pharma. Tel: 0491 578171.**

STERADENT'S SPARKLING SALES STORY. (WHAT A MOUTHFUL.)



Steradent (with the help of some amusing little TV teeth) is really putting some bite into the growing denture care market.

It's already the leading brand in the cleaner market, with a 52% share that's rising. It's even making considerable inroads into the younger partial denture wearer market.

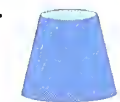
This year we're rolling out nationally the highly successful 'Happy Teeth' TV campaign at a cost of £1million- Steradent's highest spend for years.

And we're introducing three new Steradent products - Fresh, a cleaner

with mouthwash ingredients; Extra Strength, a relaunch of the Deep Clean anti-tartar formula; and new Fixative Cream with a longer-lasting hold and camomile to help soothe sore gums.

So give Steradent extra space.

And get your teeth into extra profit.





THEY'LL BE LOOKING

TO YOU FOR REAL RELIEF

FROM HAY FEVER EYES.

Brol-eze from the makers of Brolene is now available over the counter.

For the coming hay fever season there is a major new opportunity to generate OTC growth. Brol-eze, containing sodium cromoglycate previously only available on prescription, is now on sale to everyone with hay fever eyes. Coming in value-for-money 10ml bottles, it's backed by an eye-catching advertising campaign reaching your customers throughout April and May. So now is the time to stock up. A full range of high impact pharmacy display materials will be available as well as a comprehensive pharmacy education and training programme.

CALL YOUR RPR FAMILY HEALTH REPRESENTATIVE TODAY ON 0323 414312.



Brol-eze™
EYE DROPS

FOR THE TREATMENT
OF EYE PROBLEMS RELATED
TO ALLERGIC SEASONAL
CONJUNCTIVITIS
INCLUDING HAY FEVER



ABBREVIATED PRODUCT INFORMATION: Eye drops containing sodium cromoglycate Ph. Eur. 2% w/v as the active ingredient with benzalkonium chloride 0.01% w/v, as preservative, disodium edetate BP 0.05% and purified water BP. **Indications:** For the treatment of acute (seasonal) allergic conjunctivitis, including hay fever. **Dosage:** Adults, children and the elderly: One or two drops into each affected eye up to four times daily. **Contra-indications:** Hypersensitivity to sodium cromoglycate, benzalkonium chloride or disodium edetate. **Interactions:** None known. **Warning/Precautions:** Since sodium cromoglycate is essentially prophylactic, patients should be advised not to discontinue using the drops unless advised to do so. The eye drops should not be used whilst wearing soft contact lenses, because of the preservative they contain. As with other ophthalmic preparations, patients should be advised to discard any solution remaining 28 days after opening. Brol-eze should only be used during pregnancy where clearly needed. **Adverse Effects:** Following instillation of the drops, transient symptoms may occur. These may include blurring of vision, burning, stinging. Patients should be advised not to drive or operate machinery until clarity of vision has been restored. **Overdose:** Sodium cromoglycate is poorly absorbed through the gastro-intestinal tract. In case of overdose, no action other than medical observation should be necessary. **Pharmaceutical Precautions:** Store below 30°C and protect from light. **Legal Category:** P. **Package Quantity:** Each bottle contains 10ml. **Retail Price:** £3.59. **Product Licence Number:** PL 0530/0356. **PL Holder:** Norton Healthcare Ltd. **Distributor and further information:** Available from Rhône-Poulenc Rorer, St Leonard's Road, Eastbourne BN21 3YG. **Date of preparation:** January 1994.

Counterpoints

SB tidy up Diocalm products package

Smithkline Beecham have relaunched their three Diocalm products, renaming one of them and bringing a consistency in packaging to the range.

Consumer research suggested that, although there was high brand awareness, there was confusion over the range. The loperamide variant suffered from low recommendation and no prescription heritage. Sales of Diocalm Junior, the oral rehydration product targeted at children, were low since many parents tend to take young children with diarrhoea straight to the GP.

Diocalm Junior has therefore been retitled Diocalm Replenish. In children under six, oral rehydration products are the only recommended OTC treatment for acute diarrhoea. SB are now encouraging wider usage among the rest of the family.

The original chewable Diocalm tablets have been renamed Dual Action. The formulation (morphine HCl 0.395gm, activated attapulgit 312.5mg and attapulgit 187.5mg) remains unchanged.

The new packaging aims to clearly position each variant. The relaunch will be supported by £500,000 national Press advertising

New fruit drink is ACE

ACE Beta Carotene is a new fruit drink made up of nine different fruit flavours.

Containing vitamins A, C and E, plus beta carotene, the drink comes in 250ml bottles retailing at between £0.89-£0.99.

The launch of the product will be supported with a £500,000 PR campaign including Press advertising and sampling. **The Natural Fruit & Beverage Co. Tel: 041-551 8778.**



campaign in July and August to cash in on the Summer holiday season. Advertising in women's magazines will have a strong educational message.

A consumer booklet highlighting the symptoms and likely causes of

diarrhoea will be available through pharmacies from this month. SB will also be running a series of training programmes over the Summer geared towards pharmacy assistants. **Smithkline Beecham. Tel: 081-560 5151.**

First four in Medic Herb 'biological' range

Medic Herb have launched the first four products in a new range of herbal medicines which they term "biological medicines".

Valerina Day-time, £3.49 (400mg valerian, 325mg melissa); Valerina Night-Time, £3.49 (400mg valerian, 382mg hops, 162mg melissa); Revitinol, £3.79 (260mg echinacea); and Aqualette, £3.99 (600mg dandelion, 675mg horsetail) are blister

packed in 80s and come with leaflets, shelf-talkers, window display packs and information sheets.

An introductory case of three packs of each product comes with a merchandising kit (initial 10 per cent off trade at £22.49 while stocks last), with the launch backed by a major advertising campaign, say distributors **Kallo Foods Ltd. Tel: 0932 355323.**

Million behind Migraleve

Charwell are putting £1 million promotional support behind Migraleve.

Television advertising on *Big Breakfast* runs until mid-June, while a national Press campaign continues throughout the year. The campaign includes advertising to GPs.

A display unit offer is available to pharmacies. **Charwell Health Care. Tel: 0420 84801.**

Osteocare advertises on LBC

Osteocare advertisements will be broadcast on LBC "Newstalk" and "Talkback" programmes over the next three weeks.

The commercials will feature Fiona Fullerton explaining the role of calcium in the diet and through supplementation in helping women and men of all ages. **Vitabiotics Ltd. Tel: 081 963 0999.**

Make Contac with Coughcaps capsules

Coughcaps, the sustained-release dextromethorphan capsule product for coughs from Smithkline Beecham, is being relaunched under the Contac brand name.

The cough market, dominated by liquids, was worth over £70 million in 1993 with 80 per cent of sales going through pharmacies. Dry cough tends to be a more year-round complaint, and SB see the Contac Coughcaps appealing to busy people looking for a modern and convenient medication format.

Packaging is in line with the red Contac pack and will highlight the proposition that the product offers up to eight hours' relief from dry cough (10 capsules, £2.69).

Putting the pharmacy-licensed Coughcaps under the Contac name brings SB's OTC sustained relief products under one umbrella. The company believes there is a niche for this type of product, and will be plugging the "tiny time pills" theme in advertising for the brand.

New display material for the range will be available for the 1994-95 Winter season, and Coughcaps will be supported as part of the seasonal campaign for Contac. An educational booklet for assistants is available now, explaining the product benefits and how the sustained relief action works. **Smithkline Beecham Consumer Brands. Tel: 081-560 5151.**



Oxy teams up with teen fashion leader

Smithkline Beecham are making a determined effort to take their Oxy brand to the pole position in the pharmacy medicated skin care market.

The brand is to get £2.5 million support in a television campaign currently under way and running through the Summer, encouraging spotty teenagers to "oxycute" those pimples.

From June, a consumer on-pack offer, intended to appeal to the brand's core users, will offer the chance to win £50,000-worth of Joe Bloggs' denim jeans and shirts. Entry is through leaflets which will be attached to all Oxy

products. Consumers have to answer a simple question and send in their entries for a prize draw.

The promotion will be supported by radio advertising. Editorial coverage and competitions in teenage magazines will offer jeans, shirts, CDs and Oxy "goody bags".

Product manager Annabel O'Dwyer feels it is something of a coup to tie up a leading fashion jeans manufacturer with the brand.

The last two months saw Oxy taking a 28.5 per cent market share, with year on year sales up 39 per cent. **Smithkline Beecham. Tel: 081-560 5151.**

NEW FREEDOM FROM HAYFEVER

—  —
**ARE YOU READY
FOR APRIL 26TH?**



BECONASE HAYFEVER, Aqueous Nasal Spray.
(beclomethasone dipropionate)

Essential information.

Presentation Aqueous Nasal Spray containing 50 micrograms beclomethasone dipropionate per spray.

Uses Treatment of seasonal rhinitis (hayfever).

Dosage and administration For intranasal use only. Two sprays into each nostril every morning and evening. For use in adults and children aged twelve years and over. Beconase Hayfever does

not cause drowsiness. There are no known interactions with other medicines.

Contra-indications Hypersensitivity.

Precautions If hayfever symptoms have not improved after 10 days, consult the doctor.

Pregnancy and glaucoma Consult doctor before use.

Side effects Dryness and irritation of the nose and throat, unpleasant smell and taste, and epistaxis have been reported rarely. Rare cases of raised intra-ocular pressure or glaucoma

have been reported.

Retail selling price Pack with 100 sprays – £4.99.

Legal category P.

Date of preparation 14 December 1993.

Further information is available on request from: Allen & Hanburys Limited, Uxbridge, Middlesex UB11 1BT.

Product licence number 10949/0093.

Product licence holder Glaxo Pharmaceuticals UK Ltd., Stockley Park, Uxbridge, Middlesex UB11 1BT.

If in doubt call the
ARNER LAMBERT HOTLINE,
FreeCall 0500 878889.



March 196

Mentadent range gets bicarb variant

Elida Gibbs have become the first company to add a sodium bicarbonate variant into an existing UK toothpaste brand.

The move follows the UK launch last year of Arm & Hammer Baking Soda Toothpaste (C&D Nov 6, p806).

In America, this sector of the market accounts for one purchase in four and Elida Gibbs, who have already launched their sodium bicarbonate variant in Italy, forecast significant potential for the UK.

In the first year, the company is looking to the new variant to provide a 2 per cent incremental growth for Mentadent. Steve McNicol, category manager, says that research predicts that consumers will "trade up" from standard protection pastes.

"We feel strongly that the bicarbonate of soda sector has significant growth potential and would reckon it to hold 10 per cent of the market in value terms by the end of 1994," he says.

The active ingredient in Mentadent Bicarbonate of Soda toothpaste helps neutralise plaque acids, and particles of the bicarbonate act as a mild abrasive to help remove



plaque and polish teeth. The paste also contains fluoride.

While in America the term "baking soda" is used, Elida Gibbs felt British users associated this more with the kitchen than the bathroom, and so opted for the description "bicarbonate of soda".

Mentadent Bicarbonate of Soda Toothpaste is available in two sizes — 50ml, retailing at £0.92, and 100ml, at £1.65. Trial

sizes of 25ml will be available from June, selling at £0.39. From July, packs will be tamper-proof.

Support for the new variant totals £3.2 million and includes £2.2m on a TV advertising campaign starting in May. Press ads will run from May until September and sampling will start in August and continue until December. **Elida Gibbs. Tel: 071-486 1200.**

Baby markets: grocers gain at pharmacists' expense

Another baby market report brings disappointing news for pharmacists.

Heinz' "Baby Products Market 1994" report comes to similar conclusions to those of Farley's "1994 Market Report" (C&D March 26, p508) — that grocers continue to make further share gains at the expense of pharmacists.

Heinz report that Boots held on to their 23 per cent share of the total £866 million baby products market last year, while "other chemists" fell from 13.6 per cent in 1992 to 12.3 per cent.

In one traditional pharmacy area — nappy rash creams — sales from grocery outlets more than doubled during the year.

The baby foods sector (meals, drinks, milks and rusks) gained 3 per cent to reach nearly £262 million

in 1993. Grocers emerged as the driving force, taking their share to over 50 per cent for the first time.

Historically weak in baby milks, grocers nevertheless increased their share by 11 per cent. Baby drinks fared worse than any other sector and declined 10 per cent.

Heinz attribute this to a general "tightening of the purse strings". Unlike foods or milks, which are seen as essentials, drinks are regarded as more of an optional extra.

Health concerns over sugar and indifferent Summer weather may also have had an adverse effect, although Heinz claim their new entry was an exception.

Meals outperformed other food groups and grew by 6 per cent to £121m. The most impressive growth (14 per cent) occurred in usage in

younger babies, which may indicate a move to slightly earlier weaning.

Heinz category manager Roger Hobbs advises that pharmacists have a merchandised meals fixture to capture first-time mothers or those with younger babies, who are most likely to visit the pharmacy.

The report estimates that if all mothers who currently make their own foods switched exclusively to prepared meals, the market would grow by at least £200m.

Changes in medicines legislation helped break down the dividing lines between different retail specialists. Examples of this "cross-over" last year were Boots' move into young children's foods, and Tesco's move into toiletries for newborn babies. **Heinz Ltd. Tel: 081-848 2386.**

Gel for Sensodyne

Sensodyne is now available in a gel format (45ml tube, £1.75; 18.5ml trial size, £0.69).

It is said to combine the efficacy of Sensodyne F with a clear blue formulation and a new

freshmint taste that will appeal to younger adults.

Sensodyne is the leading brand in the sensitive sector and number three in the total market, say **Stafford-Miller Ltd. Tel: 0707 331001.**



Skincare freebies

Purchasers of twin test packs of Clearblue One Step can claim a free skin care pack.

Presented in a pine rack, the free products, from the Faith in Nature range, include aloe body lotion, peppermint foot lotion, lavender facial wash and massage oil. **Unipath Ltd. Tel: 0234 267448.**

Help for migraine

Numark have published a leaflet on migraine for pharmacists to give to customers. It provides a checklist of common symptoms, tips on migraine management and sources of help.

Sponsored by Glaxo, the leaflet is free to Numark members. **Numark. Tel: 0827 69269.**

On TV Next Week

GTV Grampian	C4 Channel 4	STV Scotland (central)
B Border	U Ulster	Y Yorkshire
BSkyB British Sky Broadcasting	G Granada	HTV Wales & West
C Central	A Anglia	M Meridian
CTV Channel Islands	CAR Carlton	TT Tyne Tees
LWT London Weekend Television	GMTV Breakfast	W Westcountry

Arm & Hammer toothpaste:	CAR, BskyB, C4, GMTV
Andrews Antacid:	All areas
Bodyform Invisible:	All areas
Colgate Precision:	All areas
Gliss Corimist:	C4, GMTV
L'Oreal Perfection:	All areas
Neutrogena T-Gel:	All areas
Nivea Visage:	All areas except C4
Nurofen:	All areas
Nytol:	All areas
Pepcid AC:	All areas except CAR, GMTV
Proflex:	C, M, C4, A, HTV
Radox Herbal Bath:	All areas except CTV, GMTV
Radox Showerfresh:	All areas except HTV, CTV, W, CAR
Remegel:	All areas except CTV
Rennie:	All areas except CAR
Soft & Gentle:	All Areas
St Ives Hair Repair Shampoo:	A
Vaseline Intensive Care:	All areas

ARRET™ NOW MOVING FASTER THAN EVER IN 1994



To enable you to really benefit this summer from anti-diarrhoeal sales, fast acting Arret now comes with unprecedented support.

- The new backing of Centra Healthcare
- Powerful new display material
- Massive £1 million support package
- Exciting and rewarding pharmacy promotions for you
- Nationwide advertising

Act now to meet extra demand

**Contact your Centra Healthcare representative for details
or telephone 0494 450778**

Arret Abridged Product Information: **Presentation:** Capsules containing loperamide hydrochloride 2mg **Indications:** Treatment of acute diarrhoea. **Dosage and administration:** Adults and children over 12: Two capsules initially, then one capsule after every loose stool. Maximum dose: Eight capsules in 24 hours. **Contraindications:** Conditions in which inhibition of peristalsis is to be avoided, abdominal distention, colitis or as sole treatment in acute dysentery. **Precautions:** Arret is for the symptomatic relief of diarrhoea only and is not a substitute for rehydration therapy. If symptoms persist for more than 24 hours, a doctor should be consulted. Loperamide should only be used during pregnancy or lactation on the advice of a doctor. **Side-effects:** Abdominal cramps, nausea, vomiting, drowsiness, dizziness, dry mouth and skin reactions. **Price:** 6 capsules: £2.55, 12 capsules: £4.40, 18 capsules: £5.60. **Legal category:** P. **PL:** 0242/0097. **PL holder:** Janssen Pharmaceutical Ltd, Grove, Wantage, Oxon, OX12 0DQ. © JPH February 1994.


CENTRA
HEALTHCARE
A JOHNSON & JOHNSON MSD
CONSUMER PHARMACEUTICAL COMPANY
© Centra Healthcare 1994

™ Denotes trademark

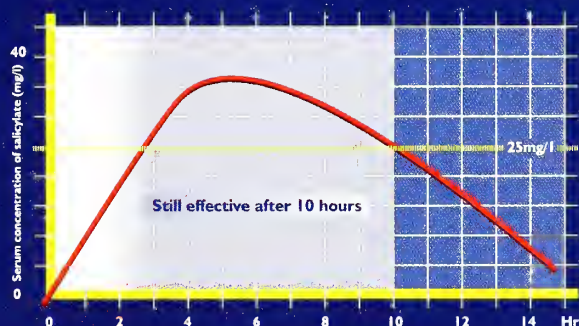
© Centra Healthcare 1994. All rights reserved.

ARRET – THERE'S NO QUICKER WAY TO STOP DIARRHOEA

pain control.

Each particle is coated with between 1 and 6 layers of polymer which allow a gradual release of aspirin over time:

- * providing sustained analgesia, permitting pain-free sleep.
- * non-sedative analgesic action, meaning no early morning drowsiness.



Taken 1-2 hours before bedtime, Anadin All Night provides effective levels of pain relief all through the night. For seven million people this could be the pain relief they've dreamed of. Anadin All Night is being supported by a £1.7 million launch campaign with TV and national press and extensive pharmacy education and point of sale materials.



A REVOLUTION IN NIGHT TIME PAIN RELIEF.

AVAILABLE ONLY FROM PHARMACIES

Incompatibilities: None known. **Use in pregnancy:** Not recommended. **Overdosage:** Only persons unduly sensitive to aspirin will show symptoms after taking the product at the recommended dosage level. Such persons should discontinue use whereupon symptoms should subside. Severe intoxication from heavy overdosage is shown by hyperventilation, fever, restlessness, ketosis, respiratory alkalosis and metabolic acidosis; CNS depression may lead to cardiovascular collapse and respiratory failure. Treatment is by induced or aspirated gastric emptying. Forced alkaline diuresis may be required after correction of acidemia by sodium bicarbonate infusion. Cardiac or renal impairment may require haemodialysis or peritoneal dialysis. Anti allergic reactions to aspirin can be treated by administration of adrenaline, corticosteroids and an antihistamine. **Pharmaceutical precautions:** Store in a dry place, at a temperature not exceeding 25°C. **Legal category:** P **Package quantities:** Blisters of 10 tablets, packed in cartons of 10 or 30. **Product licence no:** PL 0165/0103. **Date of preparation:** March 1994 **Shelf life:** 2 years. **Price:** RSP £1.95. £3.95. Whitehall Laboratories Limited, Taplow, Berkshire, SL6 0PH. *Trade Mark





Denim is being relaunched and rationalised to give it a more contemporary feel. The packaging will feature a close-up of a man wearing a denim shirt. The range now includes aftershave (100ml), bodyspray (150ml), anti-perspirant spray (200ml) and roll-on (50ml). Elida Gibbs. Tel: 071-486 1200

The light-hearted approach for Disprin

Support for Disprin this year includes a £500,000 national Press campaign across the mid-market and quality newspapers. The campaign continues with the Tony Reeve cartoons, first seen in June 1993, and the "Disprin dissolves everyday headaches" theme.

This year, the emphasis is on Disprin Direct. The next advertisement in the

new series will be on April 30, to coincide with the Eurovision Song Contest, and then on FA Cup Final day.

In addition, there will be public relations activity, including reader offer promotions in women's interest Press, national and regional newspapers. **Reckitt & Colman Products. Tel: 0482 26151.**

Sporting new look for Adidas

Beauty International are relaunching their Adidas male toiletries range with new packaging, formulations and fragrances.

The range has been divided into two fragrances: Adidas Active Sport (in green packs), a fresh citrus fragrance with menthol; and Adidas Active Fresh (in blue packs), a warm chypre fragrance with added witch hazel. Both variants come in smoked glass bottles and feature the famous Adidas stripes.

The new Adidas range comprises aftershave (50ml £5.95 and 100ml £7.95), deodorant body spray (150ml £2.29), antiperspirant spray (150ml £2.29) and shower gel (300ml £2.99).

The relaunch will be backed by a television campaign which breaks in May. A consumer competition will offer the chance to see the World Cup final in the US in July. Point of sale material is available including testers. **Beauty International. Tel: 0734 302302.**

Nurofen on TV

Nurofen is back on screen this month with a new burst of the clouds campaign, running for four weeks. **Crookes Healthcare. Tel: 0602 507431.**

April discounts

Unichem are offering independents up to 20 per cent off their surgical lines. With orders of £100, they get 15 per cent discount; with £200, 17.5 per cent off; and with £300, 20 per cent discount. The offer runs until the end of April. All correctly completed order forms will be entered into a draw to win a JRC POS system. **Unichem. Tel: 081-391 2323.**

Jungle shoot

Award-winning photographer James Cotier has been shooting the new advertising campaign for Kodak Ektar film in the Costa Rican Rain Forest. The aim is to extend the theme of last year's award-winning Ektar campaign; details will be available soon. **Kodak Ltd. Tel: 0442 61122.**

Neutradol

M.S. George are spending £3.5 million supporting their Neutradol deodorisers this year. Colour pages are appearing in the national Press and a television campaign is scheduled for September. **M.S. George Ltd. Tel: 081-332 2333.**

Shockwave

Wella are advertising Shockwave hair styling products on independent local radio as part of a £500,000 campaign. From March 28, the adverts will appear twice a day for 16 weeks during the "homework slot". Rather than a straight ad, there will be news on music, fashion, technology and style, with listeners encouraged to ring in. **Wella. Tel: 0256 20202.**

Old Spice/Nissan

Nissan Motor and Procter & Gamble have joined forces to launch Old Spice Nissan Racing. Product sampling will take place at BTCC races, shopping centres and

county shows. There will also be radio and Press advertising. **Procter & Gamble. Tel: 0784 434422.**

Fuji back sport

Fuji Photo Film (UK) are sponsoring rallycross driver Rob Coates for the third year running. His car will sport the distinctive green and red livery at events across the country including the British leg of the European Championships, due to take place on 18-19 June. **Fuji. Tel: 071- 586 5900.**

Extra sweet

Sweetex 500 tablet packs will contain an extra 10 per cent free product until the end of May. The offer will be flashed on-pack. **Crookes Healthcare. Tel: 0602 507431.**

Nivea support

Beiersdorf will be supporting the Nivea brand and relaunched Shower Creme to the tune of £6m, not £10m as C&D was told in error last week. **Smith & Nephew Consumer Products. Tel: 021-327 4750.**

New fragrance

The new-look Arrid Extra Dry range has new fragrances for the Desert Pink and Desert Peach variants. The two were always fragranced, not as implied in **Counterpoints**, April 2. **Carter Wallace. Tel: 0303 850661.**

Ad award

Warner-Lambert's Christmas advertising campaign for Alka Seltzer, "Cold Turkey" and "Your Body's Way", has won the European Creative Advertising Award. **Warner-Lambert. Tel: 0703 620500.**

Prism business

Prism have taken on a number of new brands. They are now UK representatives for AAH's Water Jel and Heat Solution; Pioneer Bioscience's Gurkha; Interwood Marketing's Didi Seven; and a range of character baby products from Grosvenor. **Prism Healthcare. Tel: 0753 831400.**

IMPORTANT NOTICE

FOLIC ACID

The Government advises that a supplement of **Folic Acid 400mcg** daily should be taken by all women planning pregnancy.

Folic Acid protects from Neural Tube defects including Spina Bifida if taken before conception.

Folic Acid 400mcg (the advised daily amount) tablets are available in the very easy to take 'Cantassium Microvitamin Range'.

A full 3 month pack for just £3.95 recommended retail price.

Click packs of 90 **Folic Acid 400mcg** Microvitamin tablets are available from all wholesalers now.

Display material and full product information available from:

Cantassium
The Vitamin Experts

Cantassium Vitamins, 225 Putney Bridge Road, London SW15 2PY.
Telephone: 081 874 1130.



To help and care for those already affected by Neural Tube defects, 10p of the purchase price for every pack of Cantassium Folic Acid sold will be donated to the Association for Spina Bifida and Hydrocephalus.



FOLIC ACID

0.4 mg per tablet

90 TABLETS ONE-A-DAY

PRESS HERE

TABLETS DISPENSED HERE



The golden touch for effective hair removal

Epilady Gold is a three-in-one hair removal system from Oris.

The system features three interchangeable heads: Gold 1, a 24-carat gold-plated head for fast removal of leg hair; Gold 2 is a smaller head for use on finer hair and sensitive areas; Gold 3 is a trimming head, suitable

for underarm and bikini areas. There are two speed settings for use with the epilator heads and a third for the trimmer.

Epilady Gold (£39.95) comes complete with adaptor, cleaning brush, carrying pouch and a tube of After Epilady cream. **Oris Beauty Products. Tel: 081-885 2999.**

Win a fantastic holiday with Senokot

Most people suffer from constipation at some time in their lives and although the condition may not be serious it can be very distressing.

As the first point of contact for many sufferers, pharmacists and counter assistants are an extremely valuable source of information. So what should you ask a customer who is suffering from constipation?

Well, first you should ensure that you ask the following questions:

- Has constipation lasted more than three or four days?
- Do you normally suffer from constipation?
- Have you recently started on a course of medication?
- Are you eating and exercise habits the same as always?
- Have you suffered a previous episode within the past month?
- Have you suffered from any acute or persistent abdominal pain?

If they answer yes to any of these questions, you should advise them to see their GP for treatment.

However, if the customer answers no, you should consider recommending a stimulant laxative because it will provide the fastest relief for acute or short term constipation.

It's important to know that not all stimulant laxatives are the same.

Constipation is colon specific, but many stimulant laxatives are not:

- Phenolphthalein and bisacodyl can cause unnecessary stimulation in the small intestine.



Picture courtesy of the French Government Tourist office

- "Phenolphthalein should be avoided as it may cause rashes. Its laxative effects may continue for several days because of enterohepatic recycling; alkaline urine may be coloured pink." (BNF No. 25 1993).

- Lubricants, eg liquid paraffin, can, with long term use, interfere with the absorption of vitamins. They can also be unpleasant due to anal seepage and irritation.

It's usually better if you can recommend a stimulant laxative (eg Senokot) which contains natural ingredients eg senna, which is obtained from the pods of the senna tree and has a gentle action.

Senokot, like constipation, is colon specific

- Senokot is a natural stimulant laxative which acts only where the problem is — in the colon.
- Because Senokot acts only in the colon it avoids most of the problems associated with other stimulant laxatives.

The benefits of Senokot Vs Chemical Laxatives:

SENOKOT	CHEMICAL LAXATIVES
Colon Specific	Systemic Action
One-off Action	Recycling Effect
Gentle Stimulant (possible temporary mild griping during adjustment and dosage)	Griping pains
Side effects mild and transient	Potential absorption problems with long term use -> possible vitamin deficiency
	Urine can turn pink



What you can win

Reckitt & Colman/Senokot are offering pharmacy assistants the chance to win Thomas Cook Holiday Travel Bonds to put towards a holiday of their choice. The first prize is a £500 Travel Bond with five runners-up each receiving a £50 travel bond.

The competition

From the copy provided, just answer the following questions:

1. What type of constipation should you consider recommending stimulant laxatives for?

2. What natural ingredient does Senokot contain?

3. What advantages does Senokot have over chemical laxatives?

- A:
B:
C:
D:
E:

Name (Block capitals please):

Address:

Telephone number (daytime):

Send your completed entry form to: Senokot Competition, 1st Floor, 199 Knightsbridge, London SW7 1RP. The winners will be decided on the closing date, May 16 1994.

Rules: 1. All entries become the property of Reckitt & Colman Products Limited. 2. The competition is not open to employees of Reckitt & Colman Products Ltd, Benn Publications Ltd, members of their families or their agents. 3. All entries must be received by May 16, 1994. 4. Reckitt & Colman Products reserve the right to publicise the winners' names and photographs. 5. The judge's decision is final and no correspondence will be entered into. 6. The prize must be accepted as offered, there is no cash alternative. 7. The competition is only open to pharmacy assistants. 8. Only one entry per person is allowed. 9. Winners will be notified by post by June 17, 1994. 10. A full list of winners will be available by post, on request.

Five minutes a day keeps cellulite away

Just five minutes of effort a day can help keep cellulite under control. This is the message of a new campaign for the Elancyl bodycare range.

Research carried out by Chefaro indicated that although many women had bought anti-cellulite products, few knew how to use them effectively. An educational programme aims to inform women what cellulite is, how it is caused and how to treat it.

The campaign includes Press advertising, consumer leaflets (detailing the five-minute Elancyl programme), in-store displays and a consumer offer of a beach bag free with Elancyl purchases of £20 or over.

The £250,000 Press campaign begins in May and will run throughout the Summer in women's magazines. **Chefaro Proprietaries. Tel: 0223 420956.**



Three new flavours from Jiffi coming soon

Jiffi are to add three new flavours to their condom range: coffee (black), grape (mauve) and lychee (ivory).

This will bring their range of coloured condoms to nine in eight flavours — so far the red variant is flavourless, but all have

the British kite-mark.

Breaking the news of its three new condoms at Helfex, the company confirms its current Ad-shel programme is under way, along with 11 radio limericks on a variety of stations. **Just Condoms Ltd. Tel: 081-677 3977.**

Face of Summer

Sensiq have drawn inspiration from back to nature fashion with cosmetics in earthy shades.

Natural Bronze Tint (40ml £2.25) gives the face a naturally-tanned look.

Powder Spheres (25g £6.99) are pearls of powder to dust over the face for a sun-kissed glow.

Powder Silk Shadow (£3.45) is a liquid to powder eye shadow with a hint of pearl. It comes in two shades.

UV Lip Defence (£4.75) containing vitamin E and provitamin B5 gives SPF15 protection. **Sensiq. Tel: 0233 625076.**

Safari trip to be won

A two-week safari holiday in Kenya is the star prize in an AAH competition.

To qualify, pharmacists have to order from at least six of 22 suppliers, enter a competition and complete a tie-breaker.

Runners-up will receive a collection of soft toy animals. **AAH. Tel: 0928 717070.**

A moment of Rapport

For a limited period, selected items in the Rapport range will be offered at a 25 per cent discount.

From May for eight weeks the 50ml aftershave will be £8.21, the 50ml eau de toilette £9.71 and the 150ml body spray £4.13. **Procter & Gamble. Tel: 081-231 8674.**

Numark offer five special Spring deals

Numark are running five special promotions for members throughout April.

Pharmacists can offer customers a free eye make-up remover with any two purchases made from their Skin Care System range. Retailers will receive a case of six eye make-up removers with every two cases of the skin care range ordered.

Prices of Ultra Dri Plus nappies have been cut, with 30p off Child 20s and 20p off Infant and Toddler

20s. The offer of any two baby toiletries for £1.50 will continue in April. A baby photo competition is also under way.

An extra 50 per cent free is offered on Numark's Super EXL film. Consumers will be offered a 36-exposure film for the price of a 24.

Numark are offering 12.5 per cent off trade prices of their household gloves, baby wipes refills and wet wipes. **Numark Management. Tel: 0827 69269.**

Travelling in style

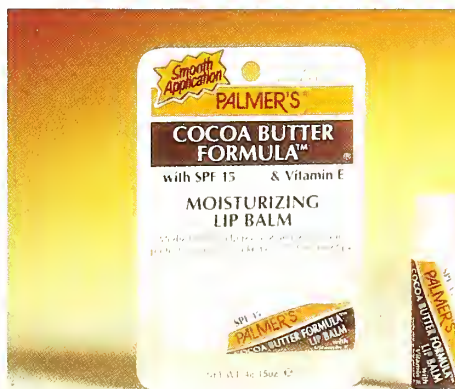
A travel bag is the free gift offered to consumers when they spend £23 or more on Hugo Boss products.

The black canvas bag comes with a 15ml aftershave balm and 15ml shower and bath gel, plus a £5 voucher redeemable against Hugo Boss products. The promotion runs from July for eight weeks. **Procter & Gamble. Tel: 0202 524141.**

Boots tackle indigestion

Boots have introduced a leaflet explaining the causes of indigestion and outlining products which can treat the condition.

In addition, it provides self-help tips for sufferers, such as eating fibre, cutting down on fatty food and stopping smoking. **Boots the Chemists. Tel: 0602 592211.**



Moisturizing Lip Balm is the new addition to the Palmer's Cocoa Butter Formula range. Enriched with vitamin E and with SPF15 protection, the stick retails at £1.35. It is available in a counter display tray holding 12 units. E.T. Browne UK Ltd. Tel: 081-532 9224

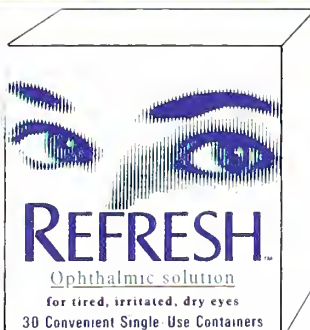
EVERYDAY EYE IRRITATIONS ARE DRY EYE SYMPTOMS

Effective Relief in Seconds from Dry Eye Symptoms

- SORE EYES
- TIRED/ACHING EYES
- GRITTY/BURNING EYES
- OFFICE/VDU EYES
- SMOKY EYES
- DRIVING EYES



World Experts in Eye Care



Allergan Ltd.
Coronation Road, High Wycombe, HP12 3SH

Recommend Refresh™

- RESTORES THE EYE'S PROTECTIVE TEAR FILM
- MORE EFFECTIVE THAN EYE WASHES OR DROPS
- PRESERVATIVE FREE
- HYGIENIC, UNIQUE SINGLE USE VIALS - NO NEED FOR EYE BATHS

Refresh™ - Advanced Treatment for Today's Eye Irritations

Pharmacy update

The latest findings on social drugs

Does it do any good to know your cholesterol level? **i-ii**

Folic acid: an obscure issue?

Ignorance among women of childbearing age is still high **vi**

Aspirin still going strong ...

New uses are still being found for this versatile drug **vii**

Socially acceptable drugs?

Alcohol has been receiving a relatively good Press recently, but the latest news on the effects of coffee and smoking remains bad

The health effects of coffee, alcohol and tobacco have all been under the microscope recently.

In the past, there have been contradictory findings about an association between coffee and osteoporosis. Now, bone mineral density in almost a thousand upper-middle class women aged 50-98 has been correlated with their consumption of caffeinated coffee.

Eighty-eight per cent of the women said they had drunk coffee at some time in their lives, but only 53 per cent were current consumers. Bone mineral density decreased significantly as total coffee intake increased.

In women with the highest consumption — 216 cup-years (cups/day x years of use) — bone loss reached 2-3 per cent in the hip and 4 per cent in the spine compared with non-consumers.

This trend was independent of known risk factors for osteoporosis, such as alcohol and smoking, and the protective effects of HRT and exercise.

Milk can help

It was not, however, independent of milk intake. Women who drank at least one glass of milk per day between the ages of 20 and 50 did not have reduced bone mineral density — emphasising the importance of an adequate level of calcium in the diet.

Alcohol has been getting a relatively good press lately, largely due to the association between moderate consumption and a reduced risk of cardiovascular disease.

Chronic alcohol consumption at this level increases blood concentrations of the beneficial high-density lipoprotein cholesterol. It has also been shown to reduce triglycerides and fasting insulin concentrations.

Similar changes have been documented in people with increased sensitivity to insulin, which prompted Californian researchers to compare insulin sensitivity in moderate drinkers (one to three drinks daily) and matched abstainers.

They confirmed significantly higher HDL levels in moderate drinkers and found that, following a glucose challenge test, both glucose levels and insulin levels were lower than in abstainers. This suggests that less insulin is lowering blood glucose by more in the drinkers.

To check this, all subjects received an infusion of somatostatin, insulin and glucose to achieve a steady plasma concentration of insulin. Although this produced similar insulin concentrations in the two groups, glucose levels were still lower in the drinkers.

Moderate alcohol consumption, therefore, appears to increase insulin sensitivity and this probably contributes to its beneficial effect on mortality.

By contrast, there is rarely anything positive to say about smoking and the latest research is no exception. Ninety-three people with insulin-dependent diabetes — 34 smokers, 35 non-smokers and 24 who had recently quit — were followed up for one year to observe whether smoking affected the rate of progression of diabetic nephropathy. Death in people with diabetes is strongly linked to the onset and progression of renal disease.

Renal disease progressed in 11 per cent of non-smokers compared with 35 per cent of smokers and 33 per cent of ex-smokers. This trend was clear in patients who had overt or incipient nephropathy at the beginning of the study, and was linked to the combined duration and extent of smoking. People with diabetes have greater need than most to avoid cigarettes.

Pregnant smokers

About 30 per cent of pregnant women smoke, even though infant birthweight is inversely related to maternal smoking and is an important factor in neonatal mortality and morbidity in later life.

Ideally, smokers should quit before conception, but many discover they are pregnant only after smoking through the critical first few weeks.

A review of the records of almost six thousand women, who presented to their GPs with unplanned pregnancy between 1976 and 1979, revealed four groups: non-smokers, smokers, quitters and reducers.



As expected, average birthweight declined with increasing consumption of cigarettes smoked during early pregnancy, with an overall mean reduction of 153g. But stopping smoking during pregnancy was beneficial: the mean birthweight among babies of quitters was 120g more than that of smokers, and this was not influenced by the degree of smoking before pregnancy.

Simply reducing consumption was not useful: birthweight was no different among infants of heavy smokers (15+ daily) who became light smokers (1-14 daily) than in those born to women who stayed heavy smokers. Birthweight was always

highest in non-smokers, but the 39g difference compared with quitters was not significant.

Smoking status correlated with educational status, which in turn is linked to wealth, so there may be a tendency for other factors to influence birthweight in non-smokers. Nevertheless, recent evidence shows that fewer than average women and people in lower socio-economic groups are quitting. These studies emphasise the need for effective educational programmes. *Diabetes Care* 1994; 17: 126-31 & 115-9; *Journal of the American Medical Association* 1994; 271: 280-3; *British Journal of General Practice* 1994; 44: 57-9

Knowing your cholesterol level

Does it do any good, or does it just worry people to know their cholesterol level? As new analyses reveal an even stronger link between serum cholesterol and the risk of heart disease, the importance of reducing high cholesterol concentrations increases proportionally.

There are two complementary ways community pharmacists currently contribute. The

population approach, in which everybody is persuaded to make small changes to achieve a large reduction in mortality nationwide — for example, with mass education programmes. And the individual approach, in which a person's behaviour is modified by specific intervention — such as measuring an individual's cholesterol level and counselling them with corrective advice according to

their risk factors.

Individual intervention has its drawbacks. A person who feels well, but has several risk factors pointed out to them, will suddenly have a problem to worry about. Previously carefree, they may become obsessed with diet, exercise and blood measurements.

Given the potential impact of providing adverse health information, there needs to be a clear benefit from doing so. Until recently, this has not conclusively been proven to be the case with cholesterol monitoring.

Several hundred ICI employees in Manchester were randomised into two groups. Cholesterol levels were measured in both, but only one group was given the result. Everyone attended a health education lecture on diet and was encouraged to follow its advice.

The cholesterol measurements were repeated 13 weeks later. Participants were told their levels were "high" if over 6.5 mmol/l; "not particularly high" if 5.2-6.45 mmol/l; and "below average" if less than 5.2 mmol/l.

Knowledge of the cholesterol level did have an impact, though it was relatively small. In the "high" group, the mean level fell from 7.13-6.84 mmol/l, with no significant change in controls.

However, although the changes were not significant, there was a small increase in cholesterol among people with lower initial levels. This confusing result is explained by the intervention of Christmas, which fell between the first and second cholesterol levels in 87 per cent of subjects.

The scientific case for knowing your cholesterol level is therefore not convincingly established by this study, and it does not offer any information on the potentially negative effects of the information. There is, however, some benefit for those at high risk — further work is needed to explore the issues raised.

Journal of Epidemiology and Community Health 1994; 48: 22-5

Treating the severe pain of cancer

There has been widespread publicity in the UK about the importance of ensuring that people in severe pain due to cancer receive adequate analgesia.

The World Health Organisation has published guidelines on treating severe pain, and hospices have produced their own guidance for prescribing. A large study from the USA now provides some useful pointers on the factors that influence pain management.

People with metastatic cancer, receiving treatment as outpatients at hospitals and specialist centres, were asked to rate their pain, related functional impairment and pain relief from analgesics. Their doctors were asked to define the cause of the pain (cancer or other cause), its treatment and estimate the degree of functional impairment.

Of 1,300 people with cancer, 59 per cent said they had pain. Their doctors attributed this to cancer in 41 per cent of cases. Of those who reported pain, 62 per cent rated it as "substantial" and 42 per cent judged their analgesia inadequate.

Poor analgesia was more common at centres which treated predominantly ethnic minorities. It was also more likely when the doctor disagreed with the patient about the pain severity; when pain was associated with a cause other than cancer; in women; and when doctors judged their patients to be less ill.

Poor analgesia had a pervasive effect. It was also linked with pain-related interference in daily life, work, relationships and mood.

Differences in health care between this country and the USA mean that these findings are not directly applicable here. Nevertheless, they indicate that poor communication facilitates poor treatment.

New England Journal of Medicine 1994; 330: 592-6



Research Digest is a regular series written by drug information specialist Steve Chaplin MRPharms, looking at the current developments in medicine

HRT and incontinence

According to American statistics, 15-30 per cent of women over 60 are affected by urinary incontinence.

Urge incontinence and stress incontinence have both been linked with drugs, diabetes, prolapse, excessive weight and smoking.

In addition, there may even be a link with the onset of the menopause. There are oestrogen receptors in the lower urinary tract; the bladder and urethra have the same embryologic origin as the vagina; and cyclic hormone secretions affect urine content.

Oestrogen preparations have been used to treat incontinence, but few adequate clinical trials are currently available. However, London gynaecologists have now conducted a meta-analysis of the available data.

A literature survey from 1969 to 1992 revealed only 23 acceptable studies. Of these, only six were controlled and randomised.

In controlled trials, subjective assessments rated the improvement with oestrogens at 64-75 per cent compared with 10-56 per cent with placebo. Differences between the two ranged from 19-89 per cent and were significant

overall.

Efficacy was found to be somewhat lower against stress incontinence, but still significant, with 46 per cent responding to treatment and 26 per cent improving with placebo.

Benefits were less clear when objective measures were used to measure efficacy. Three controlled trials, all involving women with stress incontinence, reported measurements of urine loss rates. Overall, there was no significant advantage of oestrogens over placebo.

Similar results were reported in uncontrolled trials. There was, however, a significant increase in urethral closure pressure, indicating improved bladder control.

The conclusion seems to be that HRT provides subjective benefits — possibly by an improvement in quality of life — but further work is needed to clarify its potential objective gains. In any case, the other benefits of HRT on cardiovascular disease and osteoporosis are so great that its use should be considered regardless of any effect on incontinence.

Obstetrics and Gynecology 1994; 83: 12-8

Anti-depressants for the elderly

A snapshot of the anti-depressants most popularly prescribed by psychiatrists for elderly patients places lofepramine and dothiepin equal top.

A survey of 46 consultants working with the elderly asked them to list their five most favoured anti-depressants. Every psychiatrist mentioned lofepramine and dothiepin, and placed them as their first choice in nine and eight cases respectively.

Next was fluoxetine, mentioned by 70 per cent, followed by amitriptyline (46 per cent), trazodone (42 per cent) and paroxetine (38 per cent). Perhaps surprisingly, in view of all the publicity about their adverse effects, tricyclics

were listed 2.4 times more often than SSRIs and over seven times more frequently than MAOIs.

Particular symptoms were judged to respond best to certain anti-depressants — for example, anxiety and phobia to phenelzine, agitation to dothiepin or paroxetine.

In other cases, special risks had to be avoided: the SSRIs were chosen to avoid the cardiotoxicity and risk in overdose of the tricyclics.

Adverse effects were also considered to be very important. The SSRIs and lofepramine were prescribed to avoid the anti-cholinergic effects of the older tricyclics, but dothiepin and other tricyclics were used for their

sedative properties.

The psychiatrists also set out their information requirements when considering prescribing a new anti-depressant. As might be anticipated, efficacy, safety, experience in use and cost were included. But they also highlighted specific criteria. Is there evidence of particular usefulness in elderly patients? What proportion of patients in clinical trials was elderly? And what is the physical size and shape of the formulation and its packaging?

The authors note that many of the patients these psychiatrists treat would have been excluded from clinical trials.

Psychiatric Bulletin 1994; 18: 148-51

an Injection & Tablet
 (sumatriptan)
 ribing Information
 se refer to data sheet before
 ribing.)
 ntation Injection — 6mg
 triptan (succinate) in pre-
 syringes for use with auto-
 or. Tablet — 100mg
 triptan (succinate) film-
 d tablet.
 Acute relief of migraine
 s (tablet/injection) and
 r headache (injection).
 ge and administration
 . 100mg tablet orally or 6mg
 ion subcutaneously. If no
 use a second dose should
 e taken for the same attack.
 ptoms return after initial
 use further doses may be
 . Maximum dose in 24 hours:
 100mg tablets (300mg) or two
 njections (12mg). Minimum
 e interval (injection) one
 . Patients over 65 years: Not
 mended as experience
 d. Children: Safety profile
 fficacy not yet established.
 ra-indications Hyper-
 ivity, ischaemic heart disease
 ivous myocardial infarction,
 metal's angina/coronary
 spasm, uncontrolled
 tension. Do not use
 urrently with ergotamine
 rations, MAOIs, selective
 re-uptake inhibitors, lithium.
 ings Injection should not be
 intravenously. Do not
 d the recommended dose.
 siness may occur. Chest
 sins may mimic angina but
 ly found to be the result of
 ary vasospasm. Vasospasm
 result in arrhythmia,
 mia or myocardial infarction.
 e symptoms are severe,
 tent or consistent with angina,
 r doses should not be given
 appropriate investigations
 xcluded ischaemia.
 utions Stop ergotamine at
 24 hours before Imigran.
 or use ergotamine for six
 after Imigran. Caution in
 ts with underlying cardiac
 lers whether symptomatic or
 r predisposed to coronary
 disease, or with impaired
 c/renal function. Pregnancy:
 ence limited. Not
 mended. Use only if benefit
 ighs possible risk. Lactation:
 ta in humans. Use with caution.
 effects Pain at injection site,
 tingling, heat, heaviness,
 ure or tightness affecting any
 including chest and throat,
 ent, may be intense. Flushing,
 ess, paraesthesia, weakness,
 ent, mild to moderate.
 e and drowsiness may occur.
 a/vomiting. Minor LFT
 bances reported. Transient
 reases reported.

NHS cost Injection
 ent pack: 2 x 6mg pre-filled
 es and auto-injector £41.14.
 pack: 2 x 6mg pre-filled
 es £39.14. Tablet packs:
 0mg tablets £48, 3 x 100mg
 s £24.
 ct licence numbers
 on 10949/0113.
 0004/0389.
 ct licence holders Glaxo
 ations UK Limited,
 rford, Middlesex UB6 0HE.
 1 Pharmaceuticals UK
 ed, Stockley Park West,
 ridge, Middlesex UB11 1BT.

Glaxo

Further information is available
 on request from:
 axo Laboratories Limited,
 Stockley Park West,
 uridge, Middlesex UB11 1BT
 migran is a Glaxo trade mark

BECAUSE MIGRAINE IS LIKE HELL ON EARTH



5-HT₁ AGONIST

IMIGRAN[®]

(sumatriptan)

A revolutionary acute therapy
in migraine

CAVERJECT POWDER FOR INJECTION
Alprostadil Sterile Powder

Presentation

White to off-white lyophilised powder, containing alprostadil 20 micrograms. The powder also contains lactose and sodium citrate. The diluent solution is 1 ml bacteriostatic water for injections (benzyl alcohol 0.9% w/v).

Uses

Treatment of erectile dysfunction. An adjunct to other diagnostic tests in the diagnosis of erectile dysfunction.

Dosage and Administration

The initial dose of alprostadil is 2.5 micrograms and can be increased in increments of 2.5 micrograms to a maximum of 60 micrograms. The usual dose is 10-20 micrograms. The recommended frequency of injection is no more than once daily and no more than three times weekly. The first injection of alprostadil must be done by medically trained personnel. After proper training and instruction, alprostadil may be self-injected. The dose should provide the patient with an erection that is satisfactory for sexual intercourse. It is recommended that the dose administered produces a duration of the erection not exceeding one hour.

Contra-indications, warnings, etc

Contra-indications Known hypersensitivity to alprostadil, benzyl alcohol, or any of the other constituents. Patients with sickle cell anaemia, multiple myeloma, or leukaemia (risk of priapism).

Warnings Prolonged erection and/or priapism. Patients with an erection lasting 4 hours or more should report to a physician for consideration of detumescent therapy.

Painful erection is more likely to occur in patients with anatomical deformations of the penis.

Patients on anticoagulants such as warfarin or heparin may have increased propensity for bleeding after the intracavernous injection.

Use of intracavernous alprostadil offers no protection from the transmission of sexually transmitted diseases. Individuals should be counselled about the spread of sexually transmitted diseases, including HIV.

Pregnancy and lactation: Not applicable. (High doses of alprostadil (0.5 to 2.0 mg/kg subcutaneously) had an adverse effect on the reproductive potential of male rats, although this was not seen with lower doses (0.05 to 0.2 mg/kg). Alprostadil did not affect rat spermatogenesis at doses 200 times greater than the proposed human intrapenile dose.)

Side-effects: Pain in the penis during erection (16.8%). Haematoma at the site of injection (1.5%). Other rarely reported adverse reactions are: fibrosis, erythema, testicular or perineal pain, penile deviations, hemosiderin deposits in the penis, injection into the urethra as a result of faulty injection technique, and systemic medical events. The systemic medical events that have been reported are: changes in blood pressure, postural hypotension, cardiac arrhythmias, dizziness, headache, vagal shock, and collapse (these may be related to the procedure rather than alprostadil).

Interactions. None known. Not intended for co-administration with any other agent for the treatment of erectile dysfunction.

Incompatibilities. Not known. Only the supplied diluent should be used to prepare solutions.

Pharmaceutical precautions

Caverject must be stored in a refrigerator. Reconstituted solutions should be used immediately and not stored. Do not store the unused pack or reconstituted solution in a freezer.

Legal category

POM

Package quantities

Single packs containing a vial of Caverject powder and a vial of diluent.

Product licence numbers

PL 0032/0188 Caverject Powder for Injection
PL 0032/0193 Bacteriostatic Water for Injections diluent

Holder of product licences

Upjohn Limited, Fleming Way, Crawley, West Sussex, RH10 2LZ

Date of preparation or last review

January 1994

Pricing information

£9.95 per pack

Trademark: Caverject

For Erectile Dysfunction

A solution that works

Upjohn Ltd is pleased to announce the availability of Caverject, the UK's first product licensed for the treatment of **Erectile Dysfunction**, a condition suffered all or most of the time by 1.5 million adult males.¹

Caverject is to be administered by Intra-cavernous injection and is supplied with materials suitable for self-injection (including a comprehensive patient information leaflet).

Caverject should be stored in a refrigerator at 2°-8°C

LINK CAV7M
PIP Code 205-6315
PROSPER 122788

Upjohn

3701-01

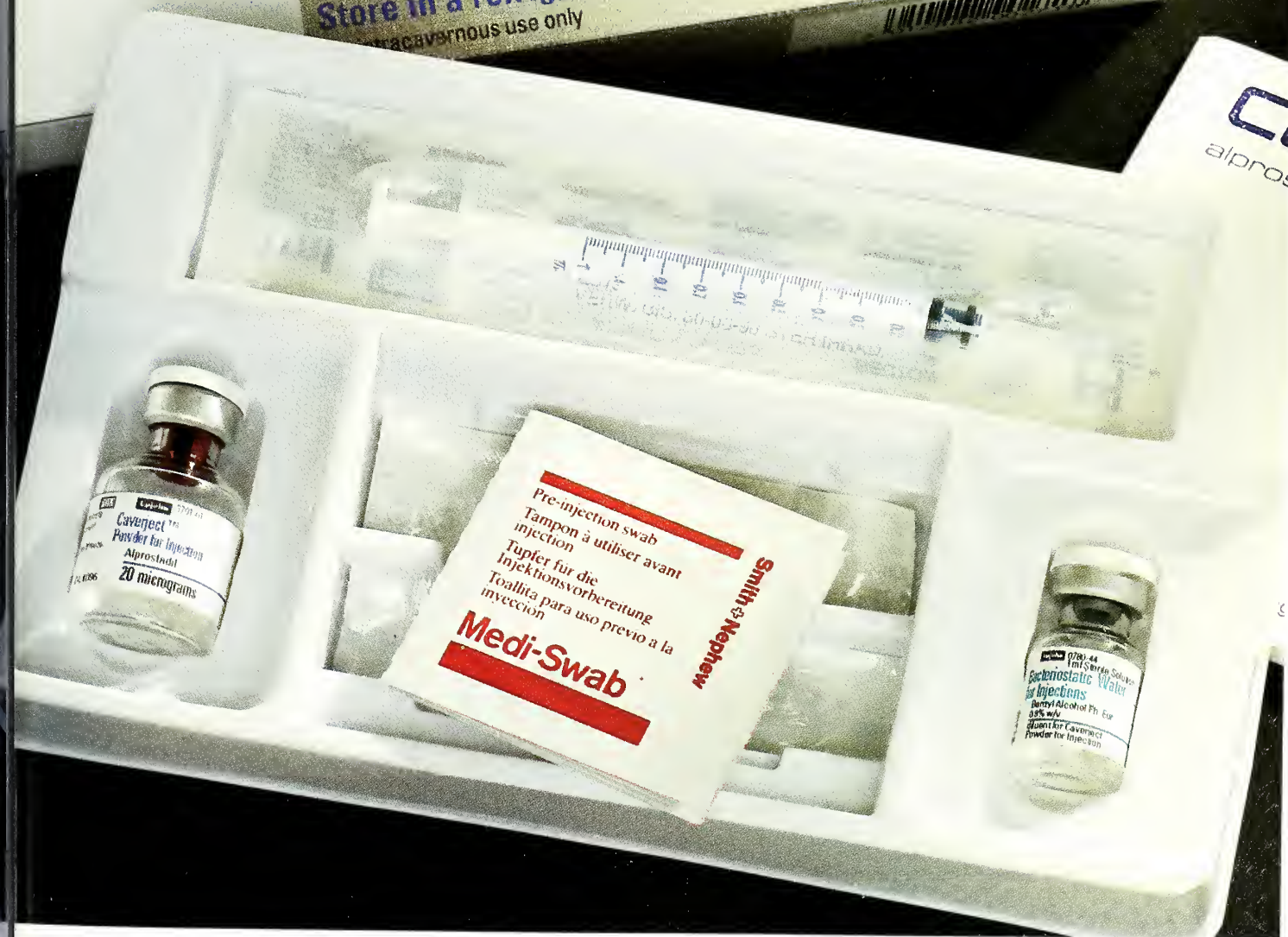
Caverject™ Powder for Injection

alprostadil 20 micrograms



20 micrograms

Store in a refrigerator at 2-8°C. Do not freeze.
intracavernous use only



alpro

Upjohn

Upjohn Limited
Kemmering Way, Crawley, West Sussex
TRADEMARK: Caverject

New

Caverject

alprostadil sterile powder

powder for injection

A SOLUTION THAT WORKS

Folic acid: an obscure issue?

Some 30 years ago, 6,000 babies born each year in the UK suffered from spina bifida, a neural tube defect. With improvements in diet, the increased availability of terminations and better diagnostic tests during pregnancy, this number has been reduced to around 400 a year.

A study conducted by the Medical Research Council Vitamins Study Group, and published in October 1991, showed that folic acid supplementation can significantly reduce the risk of recurrence of neural tube defects (NTD). It recommended folic acid supplementation for mothers of children with a NTD.

An Expert Advisory Group confirmed this finding in December 1992 and made the recommendation that all women who were planning to have a child should increase their folic acid intake to 400mcg to prevent the first occurrence of NTD. This intake should continue into pregnancy, stopping after the twelfth week.

What is an NTD?

NTDs arise when the brain and/or spinal cord fail to develop properly around the fourth week of pregnancy. However, the Department of Health advises that women continue increasing their folic acid intake until 12 weeks to ensure that any confusion over the date of conception is overcome.

Three conditions can arise:

- **anencephaly**, where most of the brain and skull are absent. The child will be stillborn or die shortly after delivery. This accounts for half of all cases
- **encephalocoele**, where the brain protrudes through a skull — a rare defect
- **spina bifida**, where the spinal canal in the vertebral column is not closed, but may be covered by skin.

Children born with spina bifida present with a range of disabilities. In the most severe cases the spinal cord bulges out of the back, the legs and bladder may be paralysed and hydrocephalus can occur due to obstruction of the fluid surrounding the brain.

Genetics and diet

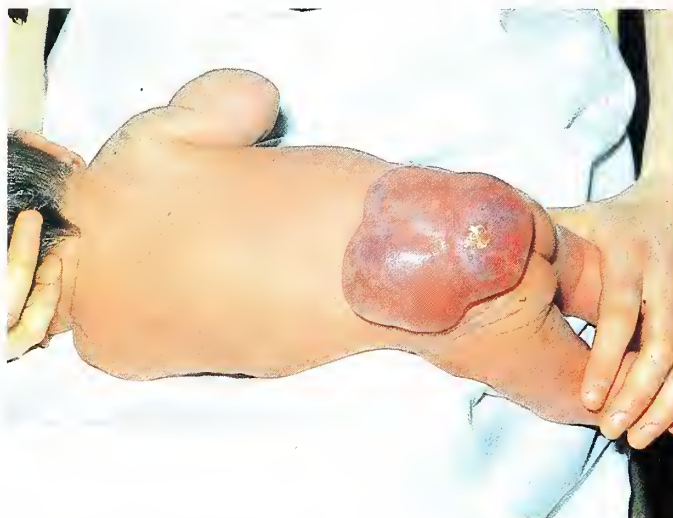
According to the DoH, there is "an undoubted genetic/environmental interaction in the causation of NTD".

NTD sufferers who have children, or those who are parents of a child with the condition, have a ten-fold increase in the risk of having a baby with NTD. After two affected pregnancies this doubles to 20-fold. Other risk factors include the age of the mother and lower socio-economic status.

Although it has been known since the mid-1960s that the folate status of a woman had a bearing on the risk of having a child with NTD, it is not known

Despite the Department of Health's best attempts to educate the public on the ability of folic acid to prevent neural tube defects in children, there is still a large degree of ignorance surrounding the topic.

Marianne Mac Donald reports



Folic acid can help prevent neural tube defects such as spina bifida

how dietary folic acid reduces the risk. What is known is that folic acid is a co-enzyme for various metabolic processes, including the synthesis of DNA, and this could be implicated in NTD development.

The DoH outlines several theories:

- folic acid is partly converted to folate, correcting the deficiency
- there may be a metabolic block which can be overcome either by increasing the folate level or by unaltered folic acid
- the mother or baby's genetic make-up influences the likelihood of spinal closure, which could be overcome by increased folic acid or folate.

Poor awareness

Despite the evidence that folic acid is beneficial, the message is not getting through to those people it should reach — would-be mothers.

Two recent surveys conducted in maternity wards highlight the level of ignorance.

The first, in Leeds, revealed that of 613 women, only ten said they had been prescribed or advised by their GPs to take folic acid before conception. Another four were aware of the importance of taking folic acid in either dietary or supplement form. Only 2.4 per cent had increased their folic acid levels before pregnancy.

The second survey, in Cardiff, showed that only 3 per cent of women who had planned their pregnancy had taken supplements.

The Department of Health says it is stepping up its education programme. Since 1992 it has ensured that the Health Education Authority has updated its advice in its *Pregnancy Book* and produced

a poster and leaflet entitled *Pregnancy, Folic Acid and You*. The DoH admits that it is now concentrating on enlisting the support of the women's Press, where it is more likely to reach its target group.

The activities of the DoH have come in for hefty criticism from the Association for Spina Bifida and Hydrocephalus (ASBAH). Publicity manager Tony Britton says: "What's the Government doing? Not much."

One of the main problems in getting the message across is that often the vital time to inform women is past before they meet a health professional. They may think about becoming pregnant, but unless they tell their GP or pharmacist, they are unlikely to get advice until pregnancy is confirmed.

There are also those women who have unplanned pregnancies. This is why ASBAH recommends that all sexually active women likely to fall pregnant should take supplements when they stop using contraception.

What is the best way of educating women about the importance of folic acid?

Manufacturers would like to see the words "spina bifida" on their supplement labels. As it stands, because folic acid is a food supplement, no such words can be included.

"What we can say is that folic acid is believed to help the normal development of the unborn baby's spinal cord. It means absolutely nothing to mums: spina bifida is the term that people understand," says one company.

A recent letter to the *Independent on Sunday* from a consumer revealed that she had been to 11 pharmacies in

Liverpool trying to buy folic acid supplements, without success.

This has been attributed to pharmacists' ignorance about the importance of folic acid or poor consumer demand. Pharmacists may also be loath to sell unlicensed products for treating a medical condition.

Even if manufacturers were to obtain a medical licence, taking their products out of the realm of food supplements into a "respectable" arena, they still cannot use the words "spina bifida" on labels. British and EC directives prohibit companies from making claims about acute neurological disorders.

The DoH is currently in negotiation with the Medicines Control Agency to see if the rules can be altered in this case. In the US, a special provision has been in force since January which allows neurological claims to be made for folic acid, although they still cannot say spina bifida.

The Proprietary Association of Great Britain is also trying to negotiate with the Ministry for Agriculture Fisheries and Food (which governs the labelling requirements for food supplements) and the Medicines Control Agency to allow a provision for unlicensed food supplements to make claims about spina bifida.

Folate foods

Women don't have to take supplements — they can increase folic acid levels by consuming more folate-rich foods like spinach, broccoli and asparagus.

Some foodstuffs — certain breakfast cereals and bread — are fortified with folic acid. There have been calls for Britain to follow the US, where all flour is now fortified with folic acid. This would restore the natural folic content of flour which is lost during refining and ensure that even women with poor diets would still have an adequate intake.

However, the DoH response is: "To do this would be to act against the recommendations of the Expert Advisory Group. They considered it important that a choice of unfortified bread and breakfast cereals should remain available."

There are also concerns that blanket flour supplementation could mask diagnosis in those people suffering from pernicious anaemia, where folic acid can improve the haematological disorder but may hasten the accompanying neuropathy.

While everyone is in agreement about the importance of folic acid, the surrounding issues are serving to obscure the main problem — the message is not getting across to the target audience in a language it understands.

If it was, then the number of babies born each year with spina bifida could drop from 400 to 100 — a reduction of 75 per cent.

Aspirin is one of the cheapest and most widely used drugs in the world. Global sales of aspirin are estimated to be around £600 million a year. Its analgesic, anti-inflammatory and anti-pyretic actions are well recognised.

More recently its antiplatelet action has been investigated and it has been shown to help prevent heart attacks, strokes and death from heart attacks.

In the United States 10-20 per cent of all aspirin sales are for patients with cardiovascular diseases. In the United Kingdom, the proportion is around 10 per cent, but this is expected to rise following the publication of new research advocating the use of aspirin in a wide range of patients with vascular disease. A number of studies have also concluded that aspirin can reduce the risk of colorectal cancer.

Discovery

The pain-relieving and anti-pyretic actions of salicylates were recognised 2,000 years ago by the Greeks. Hippocrates is said to have recommended a willow leaf preparation for the relief of labour pains in 400 BC.

During the 18th century, extract of willow bark, which contains salicylates, was reported to be an effective remedy for fevers. And in the 19th century salicylic acid was extracted or manufactured from natural sources. However, it caused considerable irritation of the mouth and gastro-intestinal tract.

Acetylsalicylic acid was first synthesised in 1853, but it was not until the 1890s that it was developed as a commercial drug. Felix Hoffman, a chemist working at Bayer laboratories in Germany, was searching for a salicylic acid derivative for his father who suffered from rheumatism. He rediscovered acetylsalicylic acid while carrying out a literature search.

Acetylsalicylic acid was found to be as effective as salicylic acid in the relief of rheumatism, but with fewer gastro-intestinal side-effects. Bayer called the drug aspirin and introduced it onto the market in 1899.

Although the company could not patent the drug as it was not a new compound, they were able to patent the manufacturing process.

The First World War prevented Britain from obtaining supplies of the drug from Germany. To overcome this problem the British government offered £20,000, a considerable sum at the time, to anyone who could develop a manufacturing process for the drug. An Australian pharmacist responded to the challenge and developed "Aspro" tablets. Britain also sequestered Bayer's exclusive right to use the name "Aspirin".

The use of soluble calcium aspirin to reduce the risk of irritation of the stomach wall was recommended as early as 1913. However, it was not until the late 1930s, with the advent of the gastroscope, that this was taken seriously.

Aspirin: the 20th century wonder drug?



Aspirin has been used for the relief of pain and fever for almost 100 years. Recent studies indicate that it has an important role in the prevention of heart attacks and strokes. Maria Murray outlines the history, actions and safety aspects of this widely available drug

Nowadays, aspirin is presented in enteric-coated, dispersible or buffered formulations to reduce gastric irritation. Administering aspirin via the rectal route, using suppositories, is another solution to this problem.

Mode of action

Once aspirin has been absorbed in the stomach or intestine it is transported to the liver where it is metabolised to salicylate, its active metabolite.

Salicylates exert their action by inhibiting the cyclo-oxygenase enzyme which in turn inhibits the production of cyclic endoperoxides (see diagram pviii). Prostaglandins and thromboxane A₂ are derived from cyclic endoperoxides so aspirin inhibits their synthesis. Prostaglandins are associated with the inflammatory reaction, pain and fever. Thromboxane A₂ is a potent vasoconstrictor and platelet aggregator.

Antiplatelet action

Aspirin's antiplatelet action could prevent more than

100,000 premature deaths worldwide (including 7,000 in the UK alone) if it was prescribed for a wide range of patients with vascular disease, according to the authors of new research on the subject.

A meta-analysis of over 300 clinical trials involving 140,000 patients was supported by the British Heart Foundation, the Imperial Cancer Research Fund and the Medical Research. It revealed that medium dose aspirin (75-325mg daily) produced reductions of about a quarter in heart attack, stroke and death among patients with acute heart attack, a history of heart attack or stroke, or other arterial diseases such as angina or peripheral vascular disease.

They concluded that long-term aspirin therapy should be considered for almost all people with suspected heart attack or unstable angina, or with any history of heart attack, stroke, angina, arterial bypass surgery or angioplasty, or other occlusive disease of the blood vessels, irrespective of age, hypertension or diabetes.

Aspirin was found to prevent

arteries and blood vessel grafts from re-blocking following bypass or widening operations on blood vessels.

New information from the study included the fact that aspirin (and other antiplatelet drugs) can prevent blood clots in veins as well as arteries — approximately halving the risk of venous thrombosis and pulmonary embolism in patients undergoing orthopaedic and other major surgery.

Another new finding of the meta-analysis is that aspirin is as effective at preventing strokes and heart attacks in women as in men. For more than ten years the US guidelines on aspirin after stroke have only recommended it for men.

For people at low risk of heart attack and stroke, there is no evidence that any benefits of aspirin outweigh the possible risks of bleeding. Researchers say because side-effects are possible, long-term aspirin may even do more harm than good in low-risk individuals.

Therefore treatment of normal people with prophylactic aspirin is not recommended. The *Drug and Therapeutics Bulletin* suggests that advice on a healthy lifestyle would be of greater benefit to the patient.

The *Bulletin* suggests that antiplatelet therapy, such as aspirin, may eventually be offered for the primary prevention of heart attack and stroke in those with specific risk factors such as hypertension, hypercholesterolaemia, renal disease or diabetes uncomplicated by a proven vascular disease, as long as they had a substantial absolute annual risk.

Dosages

The recommended dosage for the relief of mild to moderate pain is 300-900mg every 4-6 hours as required to a maximum of 4g daily.

Higher doses of aspirin are required for active inflammatory joint disease — 3.6g or more daily. Little anti-inflammatory action is seen with doses below 3g daily. The gastro-intestinal side-effects are more of a problem at these high doses and a variety of formulations are available to reduce gastric irritation.

The most widely-tested antiplatelet dosage regimen is medium-dose aspirin (75-325mg daily) and gastro-intestinal side-effects are less likely at this dose. Inhibition of platelet cyclo-oxygenase is virtually complete after a few days' treatment with a daily dose of aspirin as low as 75mg.

Higher doses do not increase the antiplatelet effect, but the onset of action is quicker. A single initial dose of 160-325mg can provide a rapid antiplatelet effect in acute situations such as acute myocardial infarction or unstable angina. Crushing, sucking or chewing the tablet then placing it under the tongue leads to rapid sublingual absorption.

Continued on pviii

Continued from pvi

Colorectal cancer

Aspirin may also have a role in the prevention of colorectal cancer. A number of epidemiological studies have found that the use of aspirin and non-steroidal anti-inflammatory drugs (NSAIDs) appears to halve the risk of developing or dying from colonic or colorectal cancer. It has been suggested that high levels of prostaglandins may be linked to colon cancer and that as aspirin reduces prostaglandin synthesis it may have a preventative role.

A recent study in the *British Medical Journal* investigated the relationship between the use of aspirin and NSAIDs and the presence of colorectal adenomas, from which most colorectal cancers are thought to develop. The use of aspirin and other NSAIDs was associated with fewer cases of adenoma development. The association was specific to these drugs and no such association was found for paracetamol. Prescribed use of NSAIDs for longer than five years was associated with the lowest risk.

Further studies are needed to confirm these findings.

Pre-eclampsia

Pre-eclampsia is a common and serious complication of pregnancy that affects more than 50,000 women in the UK annually. It is characterised by hypertension, oedema and proteinuria. It can lead to foetal and, less frequently, maternal morbidity and mortality.

Factors associated with pre-eclampsia include excessive production of thromboxane and activation of the clotting mechanism with early involvement of platelets. Low-dose aspirin with its antiplatelet action and ability to inhibit thromboxane production had been suggested as a preventative measure for the condition. A number of small trials have found that low-dose aspirin could reduce the incidence of pre-eclampsia.

However, results of a large scale study, published in *The Lancet* (March 12, 1994), found the use of aspirin was associated with a reduction of only 12 per cent in the incidence of proteinuric pre-eclampsia.

The authors of this study say results of available trials do not support the widespread routine prophylactic or therapeutic use of antiplatelet therapy in pregnancy among all women at risk of pre-eclampsia. Its use may be justified in women at particularly high risk of early onset pre-eclampsia severe enough to need very pre-term delivery. Such women should be given prophylactic low-dose aspirin from early in the second trimester of pregnancy.

Overdosage

Accidental poisoning with aspirin is still common, particularly in young children. Features of aspirin poisoning are hyperventilation, tinnitus, deafness, vasodilation and

sweating. If the patient falls into a coma, which is unusual, this indicates severe poisoning.

Absorption of the aspirin may be delayed, particularly if enteric-coated tablets have been swallowed. Therefore blood concentrations seen during the first six hours may be deceptively low and the patient should continue to be carefully monitored.

Treatment of overdose consists of gastric lavage.

Reye's Syndrome

Reye's Syndrome is a condition affecting children between two and 16 years of age. It is characterised by acute encephalopathy (cerebral disease) and the presence of fatty droplets in the liver. Viral infections such as influenza or chickenpox typically precede the syndrome.

However, a number of studies found an association between the use of aspirin during the preceding viral infection and Reye's Syndrome. No such association was discovered for paracetamol. As a result, paediatric aspirin has been withdrawn and the indications for the use of aspirin in children are limited.

Juvenile rheumatoid arthritis is one condition where aspirin still has a role and the suggested doses are 80-100mg/kg body weight daily in five or six divided doses.

Sensitivity

Aspirin sensitivity is more likely to occur in patients who suffer from asthma or allergic problems such as chronic urticaria or chronic rhinitis.

Aspirin-induced bronchospasm or attacks of asthma tend to occur in sensitive individuals about a half an hour after ingestion of the drug. The severity of the reaction varies considerably and

is not directly related to the pre-existing condition.

Cross-sensitivity often occurs with ibuprofen and other NSAIDs. Caution should be taken when recommending aspirin and ibuprofen to asthmatic patients or those with allergies.

Gastric ulceration

Gastric irritation is the most common side-effect of aspirin. The gastric mucosa is protected from the digestive actions of gastric acid and proteolytic enzymes found in the stomach lumen by a mucus-bicarbonate barrier. However, the use of aspirin is one of a number of factors associated with a breakdown of this barrier leading to pain and bleeding, gastric erosions and, in some cases, ulceration.

Aspirin increases the risk of bleeding in patients with a predisposition to gastrointestinal haemorrhage. The risk of bleeding may be reduced by using soluble, buffered or enteric-coated forms of aspirin.

Interactions

Aspirin interacts with a number of other drugs. Potentially the most dangerous of these is with anticoagulants such as warfarin. Aspirin displaces warfarin from protein binding sites in the plasma leading to a transient increase in warfarin's effect. The risk of bleeding is also further increased because of aspirin's antiplatelet effect.

Aspirin can also interact to reduce the excretion of methotrexate which would increase the toxicity of the chemotherapy.

Less serious interactions of aspirin include those with:

- Metoclopramide which enhances the effect of aspirin by increasing its absorption
- Antacids increase the excretion of aspirin by

increasing the pH of the urine

- Anti-epileptics — the effects of phenytoin and sodium valproate are enhanced
- Mifepristone. Aspirin should be avoided until 8-12 days after use of mifepristone.

Precautions

Because of the risk of Reye's Syndrome, aspirin is contra-indicated in children under 12 years of age and in breast-feeding mothers.

Aspirin can cause gastric irritation and gastric ulceration. Therefore, patients should be recommended to take it with or after food.

Gastric irritation can also be reduced by enterically coating the aspirin. With such products patients should be advised to swallow the tablet whole and not to take indigestion remedies at the same time.

Haemophilia is an inherited bleeding disorder, characterised by a tendency to bleed excessively as a result of a trivial injury. It is caused by a deficiency of factor VIII.

The use of aspirin and any other drugs that precipitate haemorrhage is contra-indicated in patients suffering from bleeding disorders such as haemophilia. Aspirin also displaces warfarin from protein binding sites prolonging the anticoagulant effect of warfarin.

The ability of aspirin to prevent heart attack and stroke has received extensive coverage in the consumer Press. However, patients with no vascular risk factors are not advised to take low-dose aspirin as the slight risk of gastro-intestinal bleeding may outweigh any possible benefits. Pharmacists should ensure that patients do not self-medicate in this way.

Conclusion

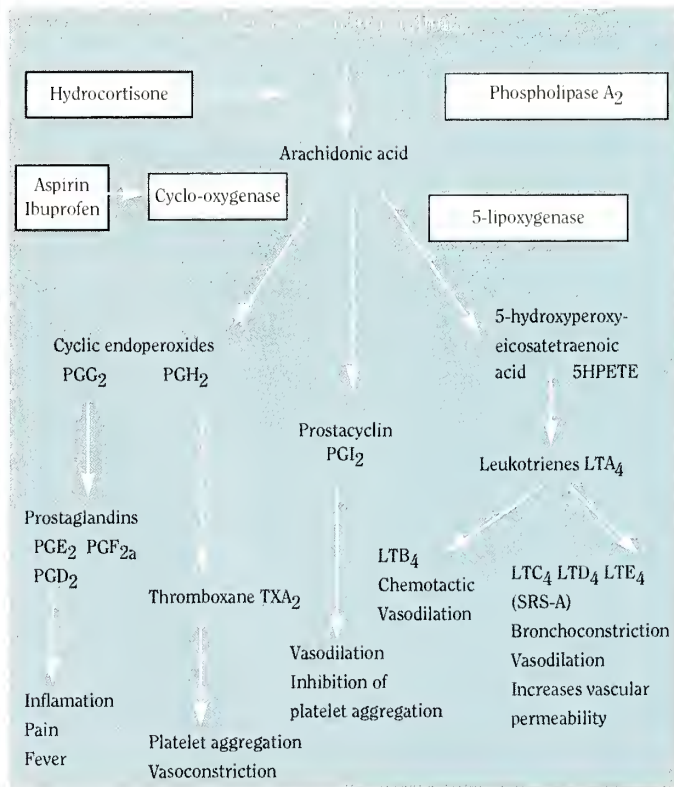
Aspirin is one of the most important drugs of the 20th century — a cheap, relatively safe drug combining analgesic, anti-inflammatory and antiplatelet actions.

As Professor Richard Peto of Radcliffe Infirmary, Oxford, suggests: "Aspirin is so familiar that many doctors and patients still don't fully recognise its importance. Perhaps if aspirin were 100 times more expensive it would be used more widely."

Although it is often perceived by the public as a relatively harmless drug, aspirin has the potential to cause serious damage if used inappropriately. Therefore, despite the wide availability and familiarity of aspirin, pharmacists and their staff cannot afford to become complacent when selling or dispensing aspirin products.

Finally, there is little doubt that aspirin has guaranteed its place in the medicine cabinets of the 21st century.

For further information on aspirin: European Aspirin Foundation, PO Box 7, Ripley, Woking, Surrey GU23 6AT (tel: 0483 225230).



Women spend, on average, two weeks of their lives removing body hair. They are four times more likely to go without make-up than expose hairy legs or underarms, according to statistics from Nair.

Hair removal is also becoming increasingly popular with men, as sports enthusiasts such as body builders, cyclists and swimmers appreciate the benefits of being smooth.

But the UK has not yet reached the extremes of the Bakitara tribe of Central Africa, where young girls approaching marriage shave off all their body hair other than pubic hair, which is ritually plucked out by their mothers over three days!

The depilatories market reached £20 million last year, a growth of 14 per cent. According to Immac's "Depilatories Market Review 1993-94", creams continue to dominate and increased 28 per cent year on year to hold over two-thirds of the market.

Waxes also experienced year on year growth of 16 per cent to claim nearly 18 per cent of the market. Roll-on lotions, which were identified separately from general lotions for the first time last year, grew by 34 per cent.

All trade sectors benefited. Boots continued to take the lion's share at nearly 45 per cent, helped by consumer promotions during the key Summer sales period. Independents turned round the decline they experienced in 1992 and now hold 18 per cent.

Drug stores also benefited from Summer promotions and increased their share by 24 per cent to 14 per cent. The grocery sector is growing by 11 per cent and now holds just under one-fifth of the market.

Reckitt & Colman believe that constant product development has encouraged a reappraisal of depilatories as a means of hair removal. Immac continues to be clear brand leader, growing 17 per cent last year to a 54 per cent brand share.

The new Immac Citrus Fresh aimed to tackle the problem of smell. Already well established



Smoothing up for the Summer

With the onset of Spring and Summer, women will be shedding their body hair along with their Winter woollies

creams, lotion and spray will benefit from a new lighter fragrance.

Carter-Wallace have revitalised their Nair range for 1994 with a new look and an advanced fragrance system which masks the unpleasant smell usually associated with depilatories.

A "low-irritation" formula includes chamomile for its soothing properties and aloe vera as a moisturiser. Cartons are being abandoned where possible to dispense with unnecessary packaging and make the product more "environmentally friendly".

The relaunch is being supported with POS material, special offer packs and a public relations campaign with sampling.

Nair is growing 15 per cent year on year and accounts for over one-fifth of sales through pharmacies. Says David Thompson, director of marketing: "The depilatory market will develop only if we provide products which are easy to use and give better results

than shaving. With Nair's new fragrance and packaging, which is much closer to a skincare range, we are demonstrating that it is pleasant to use,

Merchandising advice

Nair recommend:

1. Display a good range of brands reflecting market share.
2. Make use of consumer advice leaflets to educate customers about the right depilatory to choose and ensure that counter assistants are familiar with which type to use on which body area.
3. Seasonality is a key issue. Site the display in an area relevant to the season — for example, near to holiday products in Summer. Out of season, depilatories can be promoted as an essential addition to the overall skincare regime.

without the traditional messy application and unpleasant smell associated with depilatories."

In the USA, it is category leader and merchandised alongside skincare and sun care.

Louis Marcel added marshmallow cream and cucumber gel hair removers last year, containing skin softening and soothing agents, and introduced re-usable Salon wax strips. A public relations programme this year includes mailings to national and regional Press, consumer literature and sampling.

The Andrea range of natural wax depilatories from Original Additions now includes soft wax in strip form or in a tube which can be heated in hot water or a microwave. Any residue can be rinsed away with warm water.

Shaving systems

There have been several recent innovations in women's shaving systems.

The latest is Philips' Ladyshave Aqua range, to be launched in June, which incorporates a new Bodyselect system.

This combines two trimmers and an adjustable shaving foil, with two different settings. The upper setting is for underarms and bikini line. The small round holes in the shaving foil give a close, smooth shave while preventing delicate skin from being nipped.

The lower setting is for legs. The larger, more oval holes give optimal closeness on normal skin. Stainless steel, rather than nickel, is used for the foil as it is more durable and creates less friction, particularly on wet skin. A pop-up trimmer can be used on long hairs.

There are four models in the range, two rechargeable and two battery. All can be used wet, in the bath or shower, or dry (from £21.95 for the battery model, to £37.95 for the rechargeable with pop-up trimmer).

National Press advertising is planned for the Autumn, but most advertising will be concentrated on television in the run-up to Christmas.

Philips say they have over 50 per cent of the £10m women's shaver market.

Wilkinson Sword recently launched the Lady Protector system, aimed at the 11 million women who wet shave, and designed to reduce cuts.

Each pack (£4.49) contains the system razor, three blades and a holding tray. A £2.5m spend supports the launch, including television and Press advertising in the Summer.

Gillette's Sensor for Women took 46 per cent of the systems razor market for both men and women in the two months after its launch last August, the company says.

The launch was backed with Press advertising and Gillette expect similar success from the current television campaign. A promotion is being run through wholesalers and counter units are available from company representatives.



Louis Marcel promotion involves public relations and sampling

in Europe, its introduction to the UK is expected to attract shavers and lapsed users.

A new 150ml sensitive cream is being launched and the wax relaunched with a new carton and seven re-usable strips.

Pack graphics and colours are being updated and all original

A move to his 'n hers

The deodorants market is becoming more oriented towards specific male and female brands, as men increasingly buy their own rather than use their partners'.

"The days of the family deodorant, where everyone in a household uses the same product, are coming to an end," says Charles D'Oyly, Elida Gibbs' category trade manager. "While there will still be a role for unisex brands such as Sure and Right Guard, people seem to be sharing products much less than they did in the past."

Now 62 per cent of men choose their own brand, almost as many as those who select their own shaving products.

Mr D'Oyly believes the female market has reached saturation at about 84 per cent usership. The male market is still growing slowly; currently about 78 per cent of men use a deodorant and Mr D'Oyly thinks the market will plateau at about the same level as for women. For both sexes, usage is highest in the younger age groups.

Claire Broomfield, senior product manager for Colgate-Palmolive's Soft & Gentle, thinks this trend to

A move to "his and hers" products and progress in own-label are among the trends in the antiperspirant/deodorant market

gender-specific brands is the key to further growth because it encourages expansion in both male and female sectors.

"Shoppers can indulge themselves in more than one purchase, without having to consider the needs of the entire family," she says. "The gender-specific trend is now so apparent that unisex brands are being repositioned as male and female."

She adds that Soft & Gentle is ideally placed to cash in on this move towards femininity as women are increasingly demanding gentle, non-sting formulas which are kind to sensitive skin, particularly after shaving. This is a key selling point with Summer just around the corner.

Aerosols first

Elida Gibbs predict the deodorants market will be worth £279 million this year. Aerosols are the most popular, with nearly three-quarters of

the market, while roll-ons have nearly 18 per cent and solids 8 per cent.

Overall the market is growing 11 per cent year on year, with aerosols showing 12 per cent growth, roll-ons 7 per cent and sticks 4 per cent. Users of solid deodorants are mostly men (70 per cent).

Gillette say their Series antiperspirant deodorant gel, launched just over a year ago, has started to grow the solid category.

Combined sales of Elida Gibbs male and female deodorants gives the company over a third of the total market. Mr D'Oyly says the "super dry" sector, which includes brands such as Arrid, Sure Regular, Right Guard and ZR, has remained fairly static since 1989 at between 22-24 per cent.

The male fragrance sector accounts for just over 30 per cent of the market, while the feminine sector (such as Mum and Soft & Gentle) accounts for 16 per cent. The latter, he adds, has declined slightly with the emergence of "skin care" brands such as Sure Sensitive and Kyomi.

"I anticipate that other manufacturers will launch similar brands, as well as own-label products, so that the skin care sector will grow quite rapidly in the future," predicts Mr D'Oyly.

Again aerosols dominate this sector, although he believes there will be a shift towards roll-ons which are regarded more as a "woman's applicator".

While own-brand bodysprays have made massive gains in

recent months, own-brand deodorants have been fairly static for the past five years at about 11 per cent of the market. Toothpaste is another market where own-label is less sought-after than proprietary brands.

"Maybe people don't trust own-label as much for these



Cossack special offer (see p640)

categories," suggests Mr D'Oyly. Nevertheless, he thinks own-label development will stride ahead in the near future as the larger retailers go in for more sophisticated marketing and packaging.

"There's likely to be a much more aggressive approach in this area," he predicts. Boots, in particular, have done well with their own ranges as they have with sales of deodorants as a whole: 22 per cent of all deodorants are bought at Boots.

The grocery multiples, particularly Tesco and Sainsbury, are becoming increasingly dominant at the expense of pharmacies and now account for 47 per cent of sterling sales. Lloyds, other pharmacies and independents have 8 per cent.

Mr D'Oyly foresees a growing trend for the major retailers, such as Tesco and Boots, to

Promotions update

•This year, **Soft & Gentle** will be supported by a £2m television campaign, using the "Move closer with confidence" theme, in Spring. There will also be a further £0.5m spend in the women's Press. Promotional activity will include "extra free" offers and promotional prices throughout May.

This month's television advertising for **Sure Sensitive** gives way to cinema and Press support, while **Sure Regular** will be on television in the Summer. Cross-category promotions are being run with **Impulse** bodysprays and sampling operations for Sensitive include this month's Aerobathon.

•A national television campaign for **Mitchum** started nationally on the ITV network this month. Revlon say that when advertising

broke in London last October, there was a 150 per cent increase in sales, with brand awareness doubling.

•Moist toilet tissues are a rapidly expanding sector of the personal freshness market, say Jeyes, who are "placing all our expertise and resources behind quadrupling the market within the next five years". Television advertising of **Hakle Moists** has been boosted to over £1m this year in support of a relaunch which included a 10 per cent increase in sheets; stronger, embossed, better-cleaning fabric; a non-chlorine bleach; and packs with less waste.

•Original Additions are running a trade offer on **Trust** anti-odorant for feet until the end of May. Retailers who buy four packets (£7.45) will get one free.



A trade offer of five as four is available on Trust until the end of May

Would you tell your best friend they smelled?

Most people would not tell someone they had body odour, a recent poll has shown.

Just over half those surveyed admitted that they had been offended by someone's odour, but only a quarter were prepared to tell someone they smelled.

Women were more likely to speak out than men, with three-quarters of those who had been offended going on to recommend an antiperspirant deodorant. Only half the men of the same age (15-54) had done so.

But the trend was reversed in

the younger age groups (15-34). While young women were the most likely to be put off by a stranger's or friend's BO, young men were the most likely to speak out.

The older people were, the less they seemed to care. One in three men aged between 15-34 said they had complained, compared with only 14 per cent of men over 55. While almost a quarter of the younger women had spoken out, only 7 per cent of those over 55 had done so.

The survey, involving 1,455 consumers, was carried out for Carter-Wallace.

rationalise their ranges because of pressure on margins.

They are likely to concentrate on a few core brands plus own-label products in each category.

Aerosols are likely to remain the most popular form of application, he says. Reformulation has meant less concern about propellants and more about convenience.

This could be one reason why the demand for "natural" environmentally-conscious brands may have peaked.

"People are much more sceptical about 'green' products than they were in the late 80s and instead are concentrating on value for money," he comments.

"Price is becoming increasingly important and the deodorants market is more aggressive than it's ever been, with price promotion and discounts."

Merchandising tips

Elida Gibbs recommend that personal care products are sited in a high-traffic flow area as there is great potential for impulse purchasing.

Manita Khuller, category trade manager, has this advice: "Pharmacists should stock a compact range of top-selling brands from the

of campaigns and consumer demand, through the trade Press."

Roll-on deodorants offer the best value to the consumer — an average roll-on lasts ten weeks compared with six weeks for an average aerosol. But aerosols are the most profitable in terms of revenue per week.

So Elida Gibbs recommend that retailers put roll-ons and sticks at the top of their deodorant fixtures, as they are generally smaller, with aerosols sited immediately below rather than on the bottom shelves.

Colgate-Palmolive's Claire Broomfield agrees that aerosols should be given prominence because their use-up rate is higher, although roll-ons have been gaining ground at the expense of sticks and pumps.

"The wide choice of brands makes this a difficult area for the independent pharmacist with limited space," she says. "Avoid cheap, little-known products because they are likely to occupy valuable shelf space for longer and not sell as fast as well-supported, branded products."

After Hours is the best-selling variant of the Soft & Gentle range, with 34 per cent of sales, while Coral is the best-selling roll-on variant with 40 per cent of sales.



Soft & Gentle has £2 million television support

fastest-growing — and largest — toiletry sectors, such as bodysprays. This approach aids stock turnover and reduces inventory costs, as well as keeping consumers happy."

Pharmacists can improve their relationships with customers by offering personal assistance and advice on new products, she adds, and should read the trade Press regularly to feel confident about giving up-to-date information.

Male-specific deodorants and hower gels should be placed adjacent to the male toiletries section.

"Site the best-selling brands on the middle shelves — between waist and shoulder height — so customers don't have to search for the brands they want to buy. Good positioning on-shelf will also encourage impulse buys.

"A high-profile advertising or promotional campaign can increase sales dramatically, so retailers should keep informed

Arrid gets fresher

Carter-Wallace are repackaging and repositioning their Arrid Extra Dry aerosols this Spring.

New packaging is said to create a fresher, lighter feel, and new longer-lasting fragrances have "improved freshness".

Arrid Extra Dry Showerfresh and For Men have heightened fragrance levels, the unscented variant communicates its "non-sting" benefit, and Arrid Extra Dry Sport features a "Cool Sport" flash. New fragrances are being introduced for Desert Pink and Desert Peach.

The range will be supported by a £3-4 million campaign comprising advertising, public relations and sampling.

Carter-Wallace say that Arrid is growing ahead of the aerosol deodorants market as a whole.



English Lavender roll-on

Yardley are introducing their English Lavender roll-on deodorant to the British market in May, following its international success.

The 75ml fill is 50 per cent more than many other roll-ons and there will be a special introductory price of £1.99 (normal price £2.55).

With this new product,

Yardley hope to attract new users to the English Lavender range while building the premium roll-on deodorant sector.

The 15g cologne stick is also on special offer at £1.99 (normal price £2.25).

A consumer Press campaign for Yardley English Lavender is due to start next month.



The Ladyshave Aqua has different settings for underarms and legs

Tube or jar?

New Vaseline Intensive Care Overnight Moisture Treatment body cream is available in both tubes and jars — the same amount of the same cream at the same price. So why stock both?

The answer is because consumers feel strongly about the dispenser their cream comes in, say Elida Gibbs. Independent research shows that 50 per cent of consumers have a marked preference for jars, while the other half feel equally strongly about tubes.

If their favoured tube or jar was not available, over a third of shoppers said they would go elsewhere to buy it and about one in five would buy nothing or trade down. Only 10 per cent said they would "gladly" buy the alternative. This means a loss of 54 per cent potential business, say Elida Gibbs.



Indulge in a bodyspray

Bodysprays — for both men and women — are among the most dynamic sectors of growth in the personal care market

The female bodyspray market is showing a strong growth, particularly among 11-16-year-olds.

Elida Gibbs expect the market to increase 9 per cent in value to be worth £42 million this

categories: proprietary brands (70 per cent), retailer own-label (20 per cent) — another area of strong growth — and fine fragrance imitations (10 per cent).

The typical user is young. It is

explore more expensive fragrances.

Elida Gibbs say that display should reflect the difference between deodorants, which are seen as essential and functional, and bodysprays which are regarded as "indulgent refreshment".

The Impulse relaunch (see *Counterpoints*, April 2) involves the introduction of four new fragrances and a £5.5 million promotional spend, including television. A new display unit is available.

Men's sector

Bodysprays are also one of the fastest growing sectors of the male toiletries market, with growth rates estimated at between 12 to 22 per cent and a total market value between £52-£58m. Nearly a quarter of men use an all-over deodorant.

Special offer banded packs of Cossack are now available, enabling customers to buy the hairspray plus either the bodyspray or antiperspirant deodorant for £2.29 instead of £3.54. A public relations campaign for the brand will run throughout 1994 with a sampling programme through national consumer titles.



Gallery Cosmetics have launched ten new fragrances

Following a successful year in which Second Edition bodysprays were relaunched and a men's range introduced, Gallery Cosmetics Ltd have brought out six new fragrances for women and four for men.

The range is said to be aimed at price-conscious consumers who insist on attractive presentation and good quality, as well as value for money. Shelf edgers are available.



Display unit for relaunched Impulse

year, boosted by a major spend behind the relaunch of Impulse.

By the end of the year, they hope that half of all 11-25-year-old females will have been attracted to the market and that Impulse will have achieved a 53 per cent share by gaining new users.

Mass market bodysprays can be divided into three main

probably her first fragrance and the price of around £2 comes within her budget. She uses it daily as a bodyspray rather than as an underarm deodorant and she does not share it in the way people share other toiletries such as toothpaste.

By the time she is 20 to 25 years old, with more money to spend, she has moved on to

More than just clean

Soaps and shower gels are no longer expected just to clean. The latest products emphasise skin care by including moisturisers as important product benefits.

One example is Palmolive 2 in 1 Shower & Creme, launched last September, which combines a cleanser and skin conditioner. It is pH balanced to match different skin types and comes in dry, normal and sensitive skin variants.

Tom Zerzan, a senior product manager at Colgate-Palmolive, says the shower gel market is showing rapid growth and will be worth around £60m by the end of 1994.

"It is a highly dynamic market borne out of a trend towards increased shower usage (73 per cent of homes now have a shower), heightened awareness of skin care and a demand for convenience products that fit in with today's busy lifestyles," he says.

Palmolive 2 in 1 Shower & Creme is on television until the end of April and will be supported by a £4.9m spend during 1994. There will also be "the largest projected advertorial campaign ever in toiletries" in the women's Press

and distribution of four million samples.

Elida Gibbs are the leading manufacturer of male deodorants and shower gels, with their line-up of Lynx, Brut Aquatonic, Brut for Men, Hero and Denim. Lynx is the number one brand in this category and Mirage, the new Lynx fragrance for 1994, is expected to become the number one variant.

Lynx will be supported by a £9m promotional and advertising campaign this year, including specific television advertising for Mirage.

Brut Aquatonic will have a £3.5m spend, of which £2.3m will be on a television commercial featuring super model Helena Christensen.

Denim relaunch

Denim is being relaunched this month to achieve harmonisation of the brand across Europe. Its new look takes a lead from the packaging used in Italy, where Denim is the number one mass market fragrance, and reintroduces the shirt and hand motif.

Last September, Cussons launched the Imperial Leather Mild range of soap, shower



Cussons go for extra moisturisers and light fragrance — designed to be kind to delicate skin, and suitable for the whole family

creme and creme bath, formulated with extra moisturisers and light fragrance to be kind to delicate skin and suitable for the whole family.

Both the creme bath and shower creme are soap-free, clinically tested for sensitive skin and balanced to the skin's natural pH.

National advertising worth £1.3m started last month for Carex, Cussons' recently launched, anti-bacterial, moisturising hand wash. It is backed by public relations and promotions and there will be a five million sample drop in June.

Moisturising ingredients are also included in Yardley's Classic English soaps, introduced late last year as a gift set of three fragrances.

The three soaps — heliotrope, tea rose and lilac — are now available singly (£1.95). ●Magik Mary is available by appointment to give in-store demonstrations of Finders Dead Sea Magik products.

A helpline provides free advice on skin problems to retail staff and consumers on 0580 211055.

Finders International are also increasing their public relations effort.



NEW *Impulse*

A BEAUTIFUL TRANSFORMATION

This April sees the relaunch of the Impulse Body Spray range with stunning new pack designs, a unique new spray nozzle and four fabulous new fragrances.

Elida Gibbs will be investing an unprecedented £5.5m in capturing

the imagination of your customers. Don't disappoint them with anything less than all nine fragrances.

Transform your shelves and your sales – more women than ever before will be acting on Impulse.

Impulse



ELIDA GIBBS
LEADERS IN PERSONAL CARE

Body care is the fastest-growing category in the total skin care market. Last year it put on 37 per cent in volume and 29 per cent in value reaching an estimated £57 million at rrp (AGB figures).

Elida Gibbs attribute this growth to an increasing interest in personal appearance, which has been partly fuelled by the growing number of women in employment and their increased financial independence. And as the population profile veers towards the older age groups there is an increased need for products for dry skin.

In the UK about 47 per cent of women use body care products, compared to two-thirds of German women, so there is a clear potential for growth.

With an eye on the increasing interest in specialist products, Elida Gibbs launched the first mass market body moisturising cream specifically intended for overnight use. Vaseline Intensive Care Overnight Moisture Treatment body cream is expected to be worth £6m at rrp in its first year. At £3.49 for a 150ml tube or jar it offers a premium price above category average to maximise cash margins.

While 50 per cent of body

Much more than just the hands and face

A growing interest in total body care is boosting the skin care market as a whole, with a trend to premium products

building on last year's "Skin science update" campaign. Promotions and public relations activities are planned throughout 1994, including two million product sachets in the women's Press.

A 50ml trial size (£0.99) is available, together with a display tray for pharmacies.

Elida Gibbs say that the Vaseline Intensive Care range accounts for 21 per cent of the £84m hand and body care sector, making it market leader. There is a trend towards premium products and consumers trading up by seeking products with added benefits.

Elida Gibbs' brand development manager Ray Whitley comments: "Pressure will be on manufacturers to deliver real innovation that justifies any price differential."

Nine sectors

Nielsen figures show the total skin care market to be worth £420m at rrp through all outlets, including Boots and department stores.

They divide the market into nine sectors, the largest being moisturisers which account for almost half (worth £209m). Cleansers and scrubs account for 15.6 per cent and hand care for 13.6 per cent.

Other categories are astringents, baby oils/lotions

and creams, face masks, general purpose, petroleum jelly and "others".

The total market experienced a year on year sterling growth of nearly 2 per cent while

inexpensive and effective moisturiser. In this way they hope consumers will regard it as a beauty essential in a different category from Savlon antiseptics.

The move from pharmacy to the beauty counter is reinforced with new packaging in softer colours. Extensions to the range, including additional pack and tube sizes, are planned for 1995.

Senior brand manager Miles Harrison says the company is also trying to broaden the usage of the Savlon antiseptic range so it is regarded as more than a "distress/first aid" purchase. A £1.2m nationwide poster campaign running for six months until August aims to communicate Savlon antiseptic's role in more general skin care.

The non-split laminar tubes



Savlon Dry Skin is being positioned as a beauty essential

skin care takes place at night-time, many women have never been given a clear rationale for using such products, say Elida Gibbs. Yet during sleep the skin is most receptive to moisturising treatments as this is the time when it recuperates from the wear and tear experienced during the day.

Vaseline Intensive Care Overnight Moisture Treatment body cream is expected to grow the body care market by introducing new users and by encouraging existing users to trade up.

The launch is being supported with £2.6m on television and in the Press,



Vaseline Intensive Care Overnight Moisture Treatment body cream is expected to grow the body care market

moisturisers grew slightly more.

Repositioning

Zyma Healthcare are relaunching the Savlon Dry Skin range to establish it as an

are designed to be carried around, kept on the kitchen shelf or placed with other toiletries in the bathroom, rather than being relegated to the medicine cabinet as a first aid treatment.

A display unit for Savlon Dry Skin holds six packs, consumer leaflets and a pump pot dispenser for customers to try the product. It will be available by the beginning of May.

POS for Savlon antiseptic includes a counter unit, shelf edgers and window display material reflecting the advertising campaign. Available from May onwards, the material will be linked with a competition for independents. • A public relations campaign for Cetraben cream for dry skin is running in women's magazines during 1994.

Carter-Wallace Ltd say there has been a gradual increase in dry skin conditions which may be linked to air-conditioning and central heating. The line between therapeutic and the more cosmetic-based moisturisers has narrowed.

• Gala Loewe have extended into body care products with a range comprising a scented body creme, perfumed bath gel, moisturising body lotion, soap and natural deodorant.

Bathtime with Fantasma

Fantasma is a new body care range launched this month by Ted Lapidus. A cleansing gel for the bath or shower contains blackcurrant extract, an extract of the raspberry plant which has astringent and toning properties, vitamin E, and silk proteins to soften the skin.

The same ingredients are included in Satin Body Cover. Other products in the range are a non-drying perfumed soap and a perfumed spray deodorant.

Dior Svelte extends outlook

Christian Dior are extending distribution of their Dior Svelte body care range.

Currently available through Boots and department stores, the three products will be

available through other pharmacies from May-June.

Dior Svelte Body Refining Gel (200ml, £27) was launched last year and helped expand the European market.

Two further additions were launched last month — Dior Svelte Exfoliating Body Toner and Vitalising Body Moisturiser with an AHA (both 200ml, £19).

Ingredients include Terminalia sericea and Vinagava vera, claimed to have decongesting and stimulating properties.

Elancyl five-minute routine

Elancyl have launched a five-minute-a-day anti-cellulite programme, explained in their guide, *Cellulite: What is it and how to get rid of it*. A £250,000 advertising campaign starts in May in the women's Press and a POS package is available.

UK pharmacies show poorly in diagnostic testing league

A survey of European pharmacists shows that UK pharmacies offer fewer diagnostic testing services than their Continental colleagues, but nearly 50 per cent claim to have a private consultation area. The survey also looked at the future for dietetic products and attitudes towards generic substitution

UK pharmacies are less well equipped to provide a range of diagnostic tests than their counterparts in Europe.

Only 13 per cent offer cholesterol testing and 18 per cent blood pressure monitoring, although this rises to 38 per cent for ovulation tests and 41 per cent for pregnancy testing. UK pharmacists would also be less keen to supply an in-store AIDS test if one were available than any of their European counterparts: only 42 per cent would do so compared to 60 per cent in Germany and 75 per cent in Spain.

Italian pharmacists are most involved in diagnostic testing, followed by the Germans (see diagnostic testing table).

Pharmacist recommendation is felt to have the most influence over consumer purchases of diagnostic tests by just over half the sample in the UK, Italy and Spain. In France, 3 per cent of pharmacists thought they had the most influence over consumers, ahead of assistants, consumer press and television advertising and GP recommendation.

GP recommendation (12 per cent) was also seen as less influential in the UK than television (16 per cent) or consumer Press advertising (14 per cent).

Across Europe, pharmacies are asked on average just over twice a week whether they

pregnant. The glaring exception is Spain, where 66 per cent of pharmacists would do nothing and only 2 per cent would refer to a GP.

Pharmacists in all countries surveyed generally claim (80 per cent plus) to offer advice to pregnant customers about safe drug usage, healthy eating,

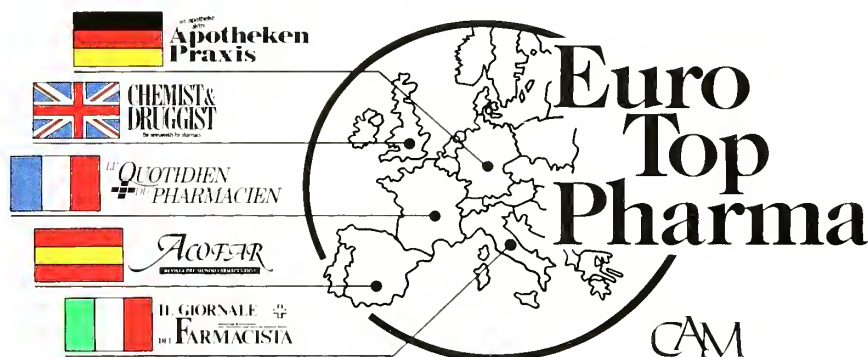
Italians and French indifferent (40 and 44 per cent).

Dietetic products

Food supplements and slimming aids are the two principal product groups in the dietetic field identified by UK pharmacists as forming the basis of future sales.

dissatisfaction with the legal and ethical constraints in the manufacture and sale of dietetic lines. In the UK, 31 per cent said they were satisfied, but 40 per cent were not, while a fifth did not know enough about the area to comment.

On the Continent, 60 per cent of German pharmacists were



alcohol intake and smoking.

With the exception of the French (14 per cent), they would also generally sell a pregnancy test on request to a customer who is clearly under the age of consent: 86 per cent of UK pharmacists say they would do this although 78 per cent would also advise seeing a GP and 26 per cent would

Each group was picked out by 32 per cent of pharmacists, while 14 per cent plumped for products for medical conditions. Some 21 per cent saw significant future sales coming from all three groups (see dietetic products table).

Slimming aids are seen as offering the best future potential by German pharmacists (55 per cent), and also in Spain (46 per cent) and France (45 per cent). Food supplements are seen as having strong sales prospects in Germany, Italy and France.

Pharmacists have divided views over the way slimming aids have been promoted, particularly on television. The Germans and Italians (82 per cent and 64 per cent) have reservations about television promotion, whereas in other countries opinion is almost equally divided.

Pharmacists in the UK (73 per cent), Spain (84 per cent) and Italy (92 per cent) all said they would support the brands better if they were informed prior to the television advertising. There was universal recognition, though, that consumer advertising was important in affecting sales of slimming aids.

For dietary regime lines, consumer advertising was felt to have considerably less influence, or even not to be that important at all.

For diet supplements, most pharmacists in the UK thought consumer advertising was either very important or quite important (39 per cent and 46 per cent respectively).

There is quite a high level of

satisfied and only 19 per cent unhappy. But 27 per cent of French practitioners strongly objected to the legal and ethical constraints in place and a further 35 per cent were not very satisfied, as were 42 per cent of Spaniards.

Product substitution

Pharmacists in the UK are less happy about substituting a prescription medicine for another with the same ingredients than other European pharmacists. Only 53 per cent are in favour of such a move compared to over 80 per cent in all the other countries.

However, only the Germans and the Spanish (74 and 79 per cent respectively) welcome the opportunity to substitute a product within the same therapy class. Only a third of pharmacists elsewhere would welcome such a move.

UK pharmacists, however, were pessimistic that they would win the right to be able to substitute therapeutically in the near future: 68 per cent did not think it would happen. The Germans and Spanish are more optimistic: 70 and 67 per cent think they will obtain such rights in the near future, as do half of Italians and French.

The sixth Pharmatop survey was carried out in November 1993 among a representative sample of 500 pharmacists drawn equally from the UK, Spain, Italy, Germany and France.

	UK	Ger	Spain	Italy	France
Slimming aids	32	55	46	17	45
Products, medical cond's	14	12	26	23	15
Food supplements	32	42	26	37	35
All of the above	21	14	20	13	6
Don't stock or don't know	10	4	6	10	3

Would you support brands better if informed prior to TV campaigns?	UK	Ger	Spain	Italy	France
	73	48	84	92	46

provide in-pharmacy pregnancy tests. In the UK, 41 per cent aim to "regularly" supply OTC pregnancy tests, while the figure rises to 71 per cent in Italy. Most pharmacists would either do nothing or, more likely, refer to her doctor a woman who has tested positive, it does not wish to be

encourage the child to approach her parents.

While pharmacists in the UK (89 per cent) and Spain (82 per cent) supported the idea of manufacturers supplying demonstration samples of pregnancy tests to show customers how they should be used, the Germans were less keen (67 per cent), and the

	UK	Ger	Spain	Italy	France
Cholesterol testing	13	26	35	39	14
Blood pressure	18	96	78	93	34
Pregnancy/ovulation	41	92	97	38	55
No of pharmacies with consultation areas (%)	35	40	46	70	53

adidas® a major new force in male fragrance

The launch of Beauty International's first male fragrance and toiletries range — Adidas, is set to join their leading female fragrance brands in establishing the standard for the market place. We look at the company's plans for the brand...



Male fragrances and toiletries are big business in the UK. A staggering £337 million was spent in this sector in 1992, more than double the spend in 1987 according to Mintel (Male Toiletries November 92). In fact male toiletries are the fastest growing sector of the total toiletries market.

According to Mintel this growth is due to a growing interest in male grooming and appearance, together with a development in participation in mens sport which encourages the use of toiletries in general.

Beauty International has undertaken a thorough research study to fully understand the male toiletries market and has identified a unique positioning opportunity for Adidas fragrance.

This position has a positive image among men under 25 and it is being used to support the launch of the new range of Adidas aftershave, shower gel and deodorants. It moves away from the traditional "boy meets girl" concept which dominates male fragrances and focuses on the concept that Adidas offers the emotions and feelings of release which are felt when playing or watching sport.

In recent consumer trials Adidas led the way in fragrance and packaging appeal when set against other mass market brands. The research results were outstanding among both men and women and gives David Allan, marketing manager at Beauty International, extreme confidence in the new activity: "The research results were outstanding and we have subsequently been very focused in not compromising any elements of the marketing mix. We are now very confident in the brand presentation about to be launched."

High quality mix

All elements of the marketing mix have been designed to have strong masculine appeal.

New Adidas is available in two distinctive fragrance packaging variants. Adidas Green (active sport) is a fresh citrus fragrance with menthol added for coolness.

Adidas Blue (active fresh) is a classic warm chypre fragrance which has witch hazel added, well-known for its healing properties. Both fragrances have been developed with the support of Benckiser's research and



development resource.

All packaging has been designed to reflect the high quality values associated with the core brand. The bottles are presented in smoked glass and carry the distinctive three stripes synonymous with Adidas.

These three stripes have been carried as a design feature throughout the whole of the range and give the collection a strong visual impact and coherent appeal.

The collection features 50ml and 100ml aftershaves priced at £5.95 and £7.95. A deodorant body spray and an anti-perspirant spray both in 150ml aerosols for £2.29. There is also a 300ml shower gel priced at £2.99

which is presented in a specially moulded flask which is both practical and projects a very modern and dynamic image.

Stockists of new Adidas will get the full benefits of a high profile publicity campaign which includes a heavy weight spend on national TV with advertising which begins in May. The advert is based on the "release" concept and will run throughout the remainder of 1994.

Additionally a consumer promotion to be run at launch gives customers the chance to win a once in a lifetime trip to see the World Cup Final in the U.S this July.

There is full point of sale

support available for in-store and window displays. This will be both eye-catching and distinctive and in-store testers will further be available for all new stockists.

David Allan adds: "Adidas is the biggest name in sportswear worldwide. Combined with Beauty International's knowledge and expertise in the fragrance market, Adidas fragrance and toiletries is destined to be a major success."

• For sales enquiries please contact: Adidas, c/o Beauty International, 1016 Arlington Business Park, Theale, Reading, Berkshire. Tel: 0734 302302.

PSNI's discreet diplomat

Derek Lawson, the Pharmaceutical Society of Northern Ireland's secretary and registrar of ten years, does not put his three heart attacks down to the job. This pragmatic and phlegmatic Ulsterman, with a wide experience in pharmacy and wholesaling, says his work preference is for discreet diplomacy, rather than fireworks



When Derek Lawson came back to Northern Ireland in May, 1983 to take up the post of PSNI secretary, he was returning to his Ulster roots from a 15-year sojourn in England.

At the time that the advertisement for Billy Gorman's job first appeared in the *Pharmaceutical Journal*, Mr Lawson was immersed in community pharmacy and contemplating buying his own shop, having quit wholesaling with Vestric after seven years.

Derek did not apply for the post the first time around, fearing the job would have been "sewn up" and that the PSNI was just going through the motions. His wife, Sandra, encouraged him to apply when the job was advertised again, to get it out of his system. Much to their mutual delight, he got the job.

The Lawson family of Sandra, Pamela and Derek returned with one extra, Julie, born in Manchester in 1973. Settling in Groomsport, Sandra took the advice of the wife of the outgoing secretary to "create your own life because he'll be out all the time".

Presidents all

Mr Lawson has served ten presidents to date — 11, if you include his apprentice master S.H. Forrest (1937-38). The first was Harvey Galbraith (1982-83) and number ten is Dr Willie

Woodside, currently in his second year in office.

At his second presidential dinner, on March 16, Dr Woodside paid tribute to Derek Lawson for "trying to keep me on the right track". A gentle eulogy, but one that seems to epitomise both men's style.

Back in 1983, Derek Lawson worked alongside Billie Gorman for just three months before the latter slipped into retirement. Before he left, Billie gave Derek a battered PSNI Calendar of 1958 and his office Bible, so that he "could get re-acquainted with it". It is still to hand on his desk today.

Mr Lawson qualified from Belfast College of Technology in 1965, a Diploma pharmacist, whose three years of study were sandwiched around two years spent as an apprentice in his home town of Bangor.

The next three years were devoted to the Belfast Co-op before the decision was taken to "cross the water" with Bangor-born Sandra and the infant Pamela to join up with Vestric as the branch pharmacist at Kingswinford.

A tour of depots at Woolley and Arnfield, Stockport and Leeds cured the Lawsons of the wanderlust and that, together with a sense of disillusionment about the cut-throat methods of wholesaling, induced Derek to re-enter community pharmacy for eight years before

his return to Belfast.

Derek Lawson believes his far-ranging experience of pharmacy made him well-suited to the job. To community pharmacy practice on both sides of the Irish Sea he added a deep knowledge of the industry and of hospital practice gained through wholesaling. That experience has served him well as he built on the links the PSNI has with its original parent body, the Pharmaceutical Society of Ireland, and with "big brother" at Lambeth, the Royal Pharmaceutical Society of Great Britain.

The PSNI and RPSGB Codes of Ethics are identical, along with much of the legislation, although that 1958 calendar contains some curiosities that are still in place! However, the main piece of primary pharmacy legislation, the Pharmacy Order (Northern Ireland) 1976, forms the core around which pharmacy revolves and evolves today.

PSNI Council meets monthly on the third Thursday evening of each month. Of its 21 members, all but three — two from The Queen's University and one from the Department — are elected. Council has five main committees (Finance & House, Ethics & Law, Education, Practice and General Purpose), with subcommittees on EC matters and Audit.

Volume of work

Derek believes the volume of work dealt with by Council has increased dramatically over the past ten years, and with it the work in his office at the Society's House at 73 University Street, Belfast, where he is aided and abetted by assistant secretary Carole Anthony and her assistant Naomi Richards.

In 1985, the secretariat automatically took on an extra burden when Mr Lawson was made registrar. Up until then, the PSNI recorded pharmacists and premises coming into and out of practice, but details were passed to the Department of Health and Social Security, who kept the Registers.

That move followed "negotiations" with the Department, which still holds responsibility for the pharmacy inspectorate in the Province. Derek believes this helps maintain the Society's close ties with the Department. There is just one inspector in Northern Ireland, a relatively new kid on the block, one Michael Mawhinney, who took over from Ivan McFarland in 1992.

"Shortly after I arrived, the Statutory Committee started to have a little more business," says Derek Lawson. "I take no credit or blame for this, it's just the way things worked out." But Mr Lawson did ensure that the outcomes of all Statutory Committee hearings are published in *Chemist & Druggist*, PSNI's official organ.

"Statutory Committee hearings are held in public, so it is quite right that the membership should learn of the few 'errors of judgment' committed by PSNI members on

occasion," he says.

Derek's stay in England happened to coincide with the peak of "the troubles", a legacy he believes still rests with the country today, where the Irish Sea can be a disincentive to visitors. "But once they've been over, they always come back!"

The ties with his counterpart at the PSI and RPSGB, Genie Canavan and John Ferguson, are crucial for all three. "It devolves to the permanent officer at each Society to maintain those links — we are the constant factors in a changing scene," he says.

"The courses of our Societies run in parallel, with professional practice very similar on both sides of the Irish Sea." But the one big difference for the PSNI, compared with the RPSGB, is that its size enables it to be closer to the grassroots — a considerable advantage for Derek Lawson.

With just 1,381 pharmacists and 513 premises on the Register, compared with 35,000 and 12,000 across the water, there is scope for one-to-one influence.

The EC Pharmacy Directives have been the focus of close co-operation between all three Societies over recent years, a close co-operation that would seem to rule out any need for Pharmaceutical Federation of the British Isles that was once mooted.

The current problem is subsidiarity, a move to remove sectoral free-movement for professionals, and to rely on the Higher Education Directive to cover all professionals wanting to work in any EC country.

And with the detailed judgement of a successful PSI defence of the Prag amendment, which prevents "foreign pharmacists" taking on businesses established for less than three years, that three-way partnership could blossom further. Already some two dozen members of both P and PSNI have taken advantage of "free movement" Directives to register North and South.

Peaks and troughs

Derek Lawson refuses to pick out the peaks and troughs of the job, or pharmacy, in his first ten years. But one suspects there is more than a little concern for the future, with its talk of new roles.

Derek took delight in practising the new roles of today a decade ago in the community pharmacy practice of David Bickler in Leeds. There the dispensing was done efficiently enough, but meeting the people — the customers — at the medicine counter was his joy, and what he misses to this day. Giving healthcare advice, acting as a social centre in the neighbourhood and building good business around those strengths was his forte.

If the PSNI secretariat can help emphasise those positives in pharmacy today, then Derek Lawson's next ten years in office will be as fruitful as the first ten.

Link up with AAH

New recruits to AAH's Linkage computer software this month and next could win one of five CD-I and stereo TV home entertainment packages. Those pharmacists who buy the PMR program will be entered into a prize draw if they correctly answer two questions and complete a tie breaker.

Kitty Little expand

Kitty Little intend to purchase the largest glasses frames manufacturer in France, Groupe L'Amey.

Audit rules change

Small companies will no longer have to have their annual accounts audited under proposals clarified this week. Although this move was first announced in November's budget, the Department of Trade and Industry is only now beginning to draft appropriate regulations. For firms to qualify, their turnover must be between £90,000 - £350,000. Instead of an audit, they will have to have a "compilation report" which has to be filed with their annual accounts at Companies House. This report will have to be compiled by an independent accountant. As well as the turnover limits, to qualify, a company

- must not have gross assets over £1.4 million
- must not be a public limited company, nor be part of a group.

The exemption must not be vetoed by shareholders holding 10 per cent or more of the share capital.

Numark aim to return to retail roots

Numark are to revert to a retailer-owned organisation after ten years of independent wholesaler ownership, marking a return to their retailer roots.

Although details have yet to be finalised, the move has been agreed in principle by Numark's wholesale members.

"This is a clear change of direction," says managing director Terry Norris, "and follows consolidation of ownership at wholesaler level. They [the retailers] need to be insulated from the changes within the wholesale community," he adds.

Retailer power has been a cornerstone of recent Numark policy (C&D February 26) with community pharmacist Peter Marshall joining the board last month. As chairman of the Retail Advisory Board, this marks the first time that retailers' interests have been represented at this level since Numark became wholesaler-owned in 1984. That is when the National Pharmaceutical Association sold its share of Numark to the wholesalers.

By putting Numark ownership back in the hands of retailers, Mr Norris hopes the voluntary trading organisation will expand and offer new opportunities for retail members: "We will be able to attract business which doesn't usually go through wholesalers,

such as cosmetics and fragrances."

Retail shareholders will also benefit from "exclusive benefits, including substantial rebates". What these would be is unclear, but they should represent several times the retailer's investment in his annual membership, says Mr Norris. They would also get a monthly breakdown of benefits, a service that Mr Norris set out to provide from the start.

The mechanism for the change in structure has not yet been agreed upon, although Numark are taking advice from three external consultants. These three are to be honed down to one in the coming weeks.

Numark will have to buy back existing shares from their wholesalers, create a new company and then issue new shares to retailers.

Whether this buy-back can be funded internally or whether outside finance will have to be secured is unclear. But Numark hope to outline their plans at a series of meetings in late Spring or Summer.

Numark's existing 1,500 retail members will have the first crack at buying shares, regardless of how long they have been with the VTO. "This would be an equal shareholding for everyone," says Mr Norris, "as the whole concept of equality of ownership is

important." Other independent retailers will then be given the chance to buy shares.

Numark plan to pay a dividend "in one form or another", and it is thought this will be at least twice a year. Another option would be to follow the US model of paying a quarterly dividend.

Along with the change in emphasis comes the inevitable change in membership fees for both retailers and wholesalers.

As well as retailer shareholders, there would be a group of non-shareholders who would still enjoy Numark benefits, although not to the same level as the shareholders. "There could be an option for different fees for non-shareholders," says Mr Norris although he would not go into details.

Because the emphasis will be taken away from wholesalers, they will have their membership fee cut. "It would be unreasonable to maintain their fee," he says.

Eager to brush aside fears that wholesalers would lose out on the deal from handing over ownership, Mr Norris calls it a "win win solution". Wholesalers would benefit from more orders placed with retailers, he says.

He recoils from a comparison with Unichem's share allocation scheme before they went public.

Yorkshire Pharmaceutical Alliance team up with Mawdsley-Brooks

The Yorkshire Pharmaceutical Alliance, the newly-formed group of Yorkshire independent pharmacists, has joined hands with Mawdsley-Brooks to form a full-line wholesaling outfit.

The joint venture company, with the working name "Newco", will start where the Bradford Chemists' Alliance left off, servicing independents in West, South and North Yorkshire, Humberside and the Pennines.

Although contracts have not yet been signed for a new site, it is in the heart of West Yorkshire near the junction of the M1 and A1, says one of the YPA's founder members, Philip Marks. At the time C&D went to Press, the Articles of Association had

not yet been drawn up, but they will "protect the independent pharmacist". Mawdsley-Brooks will run the company, but the pharmacists will have first refusal if they want to sell their shares.

Out of five board members, three will be appointed by Mawdsley-Brooks and two will be elected by the pharmacists.

Mawdsley will have to invest £600,000 cash in Newco and will hold 55 per cent of the share capital. The pharmacists will hold the remaining 45 per cent or £500,000-worth.

The £500,000 that pharmacists will have to raise is the minimum cost of setting up business. This will be satisfied by the pharmacists involved contributing at

least £2,000 each, which will be refundable should less than 100 pharmacists be prepared to participate.

According to Mr Marks, this is the number of full-line accounts needed to break even. But only 80 pharmacists have come forward. Therefore, the Alliance has set up a "participation scheme", where pharmacists pay a nominal £10 fee to register. This contribution will go towards the production of a business plan and legal fees and must be paid by April 30. Once pharmacists are "participants", they can apply for shares.

When Newco is up and running, it will be using some of Mawdsley's existing channels of credit, for example, overdraft facilities. A

maximum of £4.7m will be needed to run the company.

Financial details, including discounts for shareholders, and the Articles of Association will be unveiled at a meeting in May. Until then, proposals include:

- MB not being able to sell their shares in the first three years without 75 per cent of shareholders agreeing. After this, pharmacists would have first refusal on any shares sold
- A maximum shareholding, preventing any one pharmacist having too large a stake in Newco
- Not supplying any multiples.

YPA looked at a number of wholesalers in the North of England, but settled on Mawdsley-Brooks because they were Numark members and offered a range of surgical appliances. They also have a depot in Sheffield through the newly-acquired Smith & Hill independent wholesaler.

Unichem buy Hall Forster

Unichem have finished their pharmaceutical wholesaler buy ing programme in the UK with the acquisition of Numark member Hall Forster.

Also announced on the same day was the acquisition of the Galen group of pharmacies and the addition of contract pharmaceutical manufacturer Eldon Laboratories.

Together, the three deals came to £9.1 million, £8.3m in cash, £474,000 in loan notes and the rest paid for in Unichem shares. An extra £500,000 has been kept back until July 7 until accounts and Hall Forster's assets have been assessed.

Hall Forster serve about 200 pharmacies from their Newcastle warehouse. For the year ended March 31, they reported gross sales of £34.7m and pre-tax profits of £626,000. Net assets were £2.9m.

As Unichem already have a Newcastle warehouse, Hall Forster's will be merged with it later this year. According to Unichem sales and marketing

director, Tony Foreman, it is too early to say whether there would be any job losses. Unichem discount rates and prices would also be brought in before the end of the year, he says.

According to Unichem chief executive Jeff Harris, the existing management team will stay in place.

Like the Bradford Chemists' Alliance, who Unichem bought in December 1993, Hall Forster are Numark members, a situation Unichem would like to continue.

They officially applied to Numark to carry on membership on the day they took Hall Forster on, says Mr Foreman. Numark's managing director Terry Norris agrees: "There is no reason why the relationship should not continue."

If this is the case, Unichem would continue to offer the same Numark services to Hall Forster's customers as before. This would include supplying Numark own-label products and marketing support.

Unichem are holding a

meeting on April 27 for all Hall Forster customers and those ordering through Unichem's Newcastle depot to meet the Unichem board.

The ten Midland pharmacies in the Galen group generated sales of £5.2m for the year to March 31 and had net assets of £1.4m.

They were part of the group of 21 pharmacies that were reported bought in C&D last week and will be converted to Moss Chemists outlets, although franchises may be granted where this is appropriate. This brings the total number of Moss pharmacy outlets to 292.

Eldon used to be a contract pharmaceutical manufacturer generating business through Hall Forster. Now they will be used by Unichem, says Mr Foreman.

Wrigley in sticky deal

Wrigley have been rapped by the Office of Fair Trading for removing competitors' chewing gum and display stands.

But as the company says it will amend these practices, as well as not offer inducements to retailers for not stocking competitors' products, it has escaped referral to the Monopolies and Mergers Commission.

Warner-Lambert Confectionery — makers of Dentyne, Clorets and Stimorol gum — had reported Wrigley to the OFT after they substituted Wrigley stands for existing Warner-Lambert ones.

The OFT subsequently found that Wrigley, who supply 80-90 per cent of the UK's chewing gum market, were acting anti-competitively.

In the City

Fears of rising interest rates in the US have sent share prices tumbling across European markets over the past few weeks. British blue chips have come off by about 400 points as prospects of further cuts in rates receded at home.

Uncertainty about the impact of tax increases has also hit sentiment. But some City dealers now believe that the worst may be over and the market could stage a rally. With talk of a cut in British rates also re-surfacing, blue chips have gained ground across a broad front this week.

Against this background, Glaxo shares continue to be subject to a two-way pull. American investors remain nervous of the stock ahead of Zantac's patent expiry; the total shareholding accounted for by Glaxo's US shareholders has fallen from a peak of 27 to about 14 per cent.

Saloman Brothers, the influential US broker, are advising clients to go "underweight" in Glaxo. The broker believes that the group cannot escape generic competition for the ulcer drug commencing 1996. "This profoundly alters the outlook for Glaxo and we now expect profits to fall in 1996 and 1997 and dividend growth to be sharply curtailed," they argue. They say the gloomy prospects also have implications for other companies as it could unsettle investors.

However, Fisons have been enjoying good support thanks to a recommendation from Barclays de Zoete Wedd. The shares have also been attracting strong interest from the US on recovery hopes. Some investors believe they are a sitting duck for a takeover after reporting taxable profits of just £1 million for last year. Zeneca is regarded as the likeliest bidder.

AAH have been in the doghouse, despite selling their building materials business. The deal was accompanied by a gloomy trading statement which has led to a sharp fall in the shares. The bad news also unsettled Unichem which has come under sustained profit-taking.

Later this month, Smithkline Beecham are due to report first quarter results to March 31. Nomura Research are forecasting taxable profits to increase from £306m to £350m. The results will be the last to be announced under the chairmanship of Bob Bauman, who is leaving to join British Aerospace (C&D February 26, p356).

Unipath win pregnancy testing case

Unipath have successfully defended their patent for "one step" diagnostic kits against Chefaro Proprietaries in the High Court.

The patent forms the basis of Unipath's Clearblue One Step home pregnancy test, Clearplan One Step home ovulation test and the Pharmacy-only Clearview HCG pregnancy test.

Unilever, Unipath's parent company, have sued Chefaro Proprietaries for infringing their patent by selling the Predictor

home pregnancy testing kit.

Chefaro failed to have the Unilever patent invalidated on the grounds of obviousness. Therefore, Unilever's patent was upheld.

Unilever currently have several "one step" patent cases under way in a number of other European countries.

Unipath hold some 47 per cent of the UK's home pregnancy testing kit market, according to sales and marketing director Stephanie Senior.

Coming events

NPA diary dates

Mid-May offers two very important diary dates for members of the National Pharmaceutical Association.

A regional dinner is being held on May 19 at the Birmingham Metropole Hotel at the National Exhibition Centre. Speakers include PSNC chairman David Sharpe and Birmingham FHSA administrator G. Howells.

A conference for those in Yorkshire and the North East will be held at the Ramside Hall Hotel, Carrville near Durham on May 22. Speakers will include NPA director Tim Astill, PSNC secretary Steve Axon and RPSGB secretary John Ferguson.

Tickets for both events will be issued on a first come, first served basis. Details from Ann Northey at Mallinson House (tel: 0727 832161).

Monday, April 18

North Metropolitan Branch, RPSGB, at the Pharmacy, Brunswick Square, WC1, 7.30 for

8pm. "Wound Dressings and Wound Care", Speaker: Richard Hanna Smith & Nephew Medical Ltd.
Southampton & District Branch, RPSGB, at the Chalybeate Hospital, Southampton, 7.30 for 8pm. AGM followed by Wine Tasting.

Tuesday, April 19

South Staffordshire Branch, RPSGB, at the Civic Hall, Lichfield 7.30 for 8pm. Annual General Meeting.

Thursday, April 21

Weald of Kent Branch, RPSGB, at the Postgraduate Centre, Kent & Sussex Hospital, Mount Ephraim, Tunbridge Wells, 7.45 for 8pm. "Are You and Your Staff up to the Job?". Discussions led by Sheila Beaumont local CPPE tutor.

Wirral Branch, RPSGB, at the Postgraduate Medical Centre, Clatterbridge Hospital, 7.30 for 8.15pm, Annual General Meeting.

Saturday, April 21

Calcutta Rescue Fund open day at Stockwell Methodist Church, Jeffreys Road, Stockwell, London, 12-4pm. Open day for new volunteer pharmacists, technicians and students interested in going to Calcutta. Further details from Steve Wong, tel: 0533 825190.

Classified

Cancellation deadline 10am Friday; one week prior to insertion date
Display/Semi Display £25 per single column centimetre, min 3x1
Box Numbers £10.00 extra. Available on request.
All rates subject to standard VAT
Publication date Every Saturday
Copy date 4pm Tuesday prior to publication date.

Post to Classified Advertisements, Chemist & Druggist,
Benn Publications, Sovereign Way, Tonbridge, Kent TN9 1RW
Tel: Tonbridge (0732) 364422 Telex 95132 Fax (0732) 361534 or
Ring Stuart Bourne 0732 377322 for further information

APPOINTMENTS

NEED A NEW CHALLENGE?

CHEMIST & DRUGGIST

ADVERTISEMENT SALES EXECUTIVE

Chemist & Druggist, the market's leading retail pharmacy magazine and one of the UK's top business titles, is seeking a bright, articulate and commercially aware individual wanting to move up to an outstanding career in the world of advertisement sales.

The ideal candidate will be able to demonstrate initiative, possess good negotiating skills and have the ability to work unsupervised and under pressure.

If you think you have the necessary skills to sell on a market leading magazine, we offer an attractive salary and bonus, company car plus other benefits normally associated with a major publishing group.

Interested? then telephone 0732 364422 Ext 2445 or apply with CV to Ian Gerrard, Advertisement Manager at the following address:

Benn Publications
Chemist & Druggist
Sovereign Way
Tonbridge
Kent TN9 1RW

Benn

BOURNEMOUTH

Pharmacy manager required for easily run pharmacy

- ★ Four weeks annual holiday
- ★ Hours negotiable
- ★ Salary negotiable up to £26,000
- ★ Newly registered considered.

Apply to Prakash Shah, Coopers Chemist, Hampshire Centre, Castle Lane West, Bournemouth BH8 9UW.

Telephone 0202 531313 (work), 0202 301094
(eves + weekends).

Looking for a career in community pharmacy?
We require newly registered and experienced

PHARMACISTS

To join a progressive group based in Norfolk & Suffolk

We have vacancies for:

● Norwich ● Great Yarmouth ● Needham Market

Benefits include:

- * Excellent salary (company car available)
- * RPSGB fees paid
- * Company bonus scheme
- * Management training
- * Modern computerised premises
- * Full professional support

As we are continuing to grow we need individuals with potential to become managers providing levels of pharmaceutical care to a high professional standard. If you can be a positive asset to us please apply, in writing, enclosing a cv to:

Mr C. V. Ondhia, BSc (Hons) Pharm, MRPharmS, R.P.E.B.C.
(Can). F.S.C. Andrews Limited, 156 King Street, Great
Yarmouth, Norfolk NR30 2PA or ring for information.
Tel: 0493 843 445 daytime or tel: 0603 714 746 evenings

PHARMACISTS WITH CREATIVE FLAIR

If you're bright, enthusiastic and have the creative talent needed to become a copywriter at a top London advertising agency THEN tell us why.

Send or fax your reply along with your CV to:

Mark Goldstone, WCRS/Healthcare,
69 Monmouth Street, London WC2H
9DG. Fax: 071 379 3835.

HEREFORD

Enthusiastic Pharmacist to manage a modern computerised health centre pharmacy. Excellent supporting staff. Minimal paperwork. Most Saturdays off. Negotiable salary.

Apply with CV to David Scott,
10 King Street, Hereford
Tel: 0432 266800

APPOINTMENTS

✚ SWANSEA ✚

Third Pharmacist required to join a team managing two busy, well organised pharmacies located in the same village. First class remuneration and conditions. Willing to wait for an excellent Pharmacist.

Telephone Andrew Gush 0792 845 649 or 0792 771 372 (evenings) or write to: Central Pharmacy, 2 Heol-y-nant Clydach, Swansea.

Part-Time QUALIFIED DISPENSER

to join enthusiastic team at three partner rural practice. Hours and salary negotiable.

Telephone or write for application form:

Mr C. Ainge,
The Practice Manager,
The Surgery, Templars Way,
Sharnbrook, BEDFORD
MK44 1PZ

Tel: 0234 781392

QUALIFIED DISPENSER

(Wednesday-Friday) 8.30-12.30 & 2.30-6.00

Four Ptr Rural Practice. Attractive Salary

Apply to
The Practice Manager
Rood End Surgery, Dunmow, Essex

ISLE OF MAN

Pharmacist required for newly opened Health Centre Pharmacy.

Please apply in writing to:

Mr Richard Corkill, MRPS
Corkills Pharmacy, Elm Tree House,
Main Road, Onchan, Isle of Man
IM3 1AH

WATFORD, HERTS — Pharmacist required for community pharmacy. Easy hours. Tel: 071 722 5221, or 0923 771187.

CALCUTTA — Calcutta Rescue Fund, Pharmacists and Technicians required for voluntary work in Calcutta. Telephone 0533 825 190 or write (enclosing SAE) to CRF P.O. Box 52, Brentford, Middlesex TW8 8PS.

LONDON — Enthusiastic pharmacist required to manage easy to run pharmacy. Accommodation available if required. Newly registered considered. Tel: 081 942 0311 or evenings 081 764 6308.

**CHEMIST & DRUGGIST
CLASSIFIED**
☎ 0732 377322

SITUATIONS WANTED

SOUTH GLAMORGAN AREA — Experienced and reliable locum pharmacist available from 23rd of April onwards for regular days or short term. Tel: 0222 641 196 or 0850 597 991.

SHOPFITTINGS — Yorkline System 90. Nearly new, Cost £15,000 — £8,000, buyer to collect. Also two Fama Continental Drawer Units, cost £1300 — £700 each. Buyer to collect. Tel: 0934 629 010.

LEEDS, SHEFFIELD, HULL, DONCASTER, ROTHERHAM and SURROUNDING AREAS — Scunthorpe based locum (experienced) available for odd, regular, weekly bookings from April 17 onwards. Competitive rates anything considered. Tel: 0724 863 296/0850 853 504

NOTTS & LINGS — Experienced pharmacist available for regular/occasional bookings (days or weeks). Tel: 0522 788 353.

SITUATIONS WANTED

LONDON — Pharmacist available. Telephone 081 677 0938.

BROMLEY/BECKENHAM — Experienced locum available for weekends and evening work in Bromley/Beckenham area commencing September 1994. Tel: 0892 511 389. References available.

N/NW LONDON — Experienced, reliable pharmacist available mornings until 2.00pm on a regular basis in N/NW London, Middlesex or S. Herts. Telephone Mrs K Hirsch 081 953 0088.

GREATER LONDON, MIDDLESEX, HERTS — (Rates negotiable). Locum available. Tel: 081 952 8543.

AGENTS

JEFF SCOWEN

PHOTOGRAPHIC WHOLESALERS

AGENTS REQUIRED

- ★ ULTRA COMPETITIVE PRICING
- ★ FIRST CLASS SUPPORT
- ★ MONTHLY UPDATED PRICE LIST
- ★ EARNINGS POTENTIAL £25K + pa

TEL: 0272 629391

FAX: 0272 621590

BUSINESS FOR SALE

ALLIANCE VALUERS & STOCKTAKERS

Telephone Harrogate
(0423) 531571



NORTH NOTTS

Two branch pharmacies for sale together by way of share transfer. Total T/O FYE 31 Jan 94 £1,188,000.

Branch 1: Freehold property £65,000. NHS items average 6,900 per month.

Branch 2: Freehold property £110,000. NHS items average 4,470 per month.

Price based on offers around £550,000 for goodwill, fixtures & fittings.

S. DORSET

Family pharmacy in attractive market town. T/O FYE 31 Jan 94 £360,000. NHS items average 3,175 per month. Leasehold or freehold with one bed. L. accom available. Offers around £160,000 for Goodwill/Fixtures, plus SAV

SURREY

Prestigious town centre leasehold pharmacy T/O FYE 31 Dec 93 £454,000. NHS items average 3,300 per month. Enormous potential for increased OTC sales. Offers invited for Goodwill, Fixtures & Fittings, plus SAV.

AVON (Not Bristol) — Small pharmacy suit young pharmacist to develop. T/O £16,000, NHS 1250pm. Offers invited. Tel: 0373 461 944 eves.

PRE-REGISTRATION

**Pharmacy Graduate
requiring training in
Community or Hospital
Pharmacy to begin
July 1994**

**Tel: Martin on
021 503 0711**

EAST SUSSEX

Freehold Pharmacy in pleasant area. NHS scripts average 1,800 per month. Easily run.

**Telephone
0323 764323
after 6.30pm**

ASSISTANTS

HORNCHURCH, ESSEX — Qualified dispensing assistant required. Full/part time. Tel: 0708 747 495.

LOCUMS

Provincial Pharmacy Locum Services

We have over 3,000 pharmacists registered! Plus experience of handling over 100,000 bookings **NATIONWIDE!**

OUR BUSINESS

Place your locum problem in the hands of our experienced co-ordinators. We will inform you the moment cover is found. We leave you to get on with doing what you do best, **running your business.**

PLEASE CALL NOW!



UK PHARMACY LOCUM AGENCY

Nationwide services available, all areas covered. Free registration for proprietors & locums. Booking fee for proprietors £12 + VAT per locum per day

TEL: 021-373 1771 (24 hours)

WEYMOUTH — Reliable locum required for one day each week in easily run Pharmacy. Tel: 0305 772 272.

WANSTEAD, LONDON E11 — Pharmacist required for weekday afternoons on regular basis. Telephone 081 989 0070.

LYMINGTON, HAMPSHIRE — Experienced locum required for one week, w/c 1/8/94. Tel: 0590 673 745.

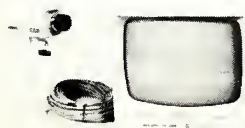
COVENTRY — Locum required, week commencing 25th July. Also odd days in August. Telephone 0203 688 902 day or 0203 501 666 evenings.

LONDON W1 — Locum required for regular Wednesdays 8.30am-2.00pm and Saturdays 8.30am-7.00pm. Tel: 071 287 3336

HOUNSLOW, MIDDLESEX — Locum required alternate Saturday mornings 9am-1pm on a regular basis. Tel: 081-894 3720.

**To advertise in this section
please contact Caroline
Greenwood on
0732 377 322**

PRODUCTS AND SERVICES



IT IS A
"STEAL"
FOR ONLY
£245⁺ VAT
THE FASIT H014

NOW YOU CAN AFFORD A PROFESSIONAL VIDEO SURVEILLANCE SYSTEM

- SIMPLE DIY INSTALLATION • CAN BE EXTENDED TO TAKE UP TO 4 CAMERAS • 2 WAY SPEECH BETWEEN CAMERA AND MONITOR • PICTURE CAN BE RECORDED ON DOMESTIC VCR

Brochure and details from Fasit Security Ltd,
Fasit House, Elkstone, Cheltenham GL53 9PB.

Telephone: 0242 870414



PHARMACY COMPUTER SYSTEMS

*BEAT THE COMPETITION
without magic*

THE PROPHET 2000 - EPOS

An Economical Electronic Point of Sale computer system with counter intelligence. Many new features at a price you can afford and should recover.

THE ALCHEMIST 3000 - PMR

The popular dispensary computer system with all you want and yet is still easy to use. With Alchemist you can have an excellent quality system without paying through the nose - special upgrade prices also apply.

**Individually they're unique
Put them together and prepare to be amazed.**

If you are currently paying too much maintenance we can help. Example:- a year's complete cover for Alchemist is only £340

CHEMTEC SYSTEMS LTD
Specialising in Pharmacy Technology

Tel:-
0772 -622839

PACE beta

**LABELLING
SYSTEMS**

THE BETTER LABELLING & RECORD SYSTEMS

- Faster
- Guaranteed Security
- More Features
- Simpler
- Free Credit
- Low Price

No one has more experience.

Don't buy without first seeing a Pace Beta demonstrated in YOUR pharmacy

- Available for one months trial

For details and a free demonstration

Telephone: 061-941 7011

37 Stamford New Road, Altrincham WA14 1EB

Three Items For A Total Cure!

PILLS - Patient Medication Records

CheckOut - POSHH EPOS

Ob-serve - Book keeping package



Hadley Hutt Computing Ltd,
George Bayliss Road,
Droitwich,
Wores. WR9 9RD
Telephone: 0905 795335
Fax: 0905 795345



PROMOTED
CHECKOUT
PILLS &
OBSERVE

STOCKTAKERS

FRANKLAND & Co.

STOCKTAKERS & VALUERS

119 Harrison Road, Belgrave, Leicester LE4 6QN

Telephone: (0533) 665299 Fax: (0533) 610284 Mobile: (0374) 181850

SPECIALISTS IN PHARMACY STOCKTAKING NATIONWIDE

**BIG ENOUGH TO COPE
SMALL ENOUGH TO CARE**



Comprehensive stocktaking and business transfer service

SHOPFITTINGS



0626-834077

COMPREHENSIVE DESIGN, MANUFACTURE
AND INSTALLATION SERVICE FOR THE
RETAIL PHARMACY

KING CHARLES BUSINESS PARK,
OLD NEWTON ROAD, HEATHFIELD,
DEVON TQ12 6UT

PROFESSIONAL SHOPFITTING FOR RETAIL PHARMACIES

- NATIONAL COVERAGE
- PROJECT MANAGEMENT
- FULL AFTER SALES SERVICE
- PHARMACY SPECIALISTS

BEANSTALK LTD. CHICHESTER W. SUSSEX PO14 2TZ

0243 788111

BEANSTALK
THE RETAIL SHOPFITTERS

MIP

SPECIALIST PHARMACY SHOPFITTING

CONSULTATION
DESIGN
MANUFACTURE
INSTALLATION
SERVICE

UNIT 11, COVENTRY CANAL WAREHOUSE, LEICESTER RD
COVENTRY CV1 4LH TELEPHONE: 0203 223502

Martex
SHOPFITTING

FROM LOW COST PERIMETER SHELVING TO
UPMARKET PERFUMERY SHOWCASES TRADITIONAL
OR CONTINENTAL DISPENSARIES

CONTACT MARTIN BAGG FOR A COMPLETE
SHOPFITTING SERVICE FOR THE PHARMACIST

0392-216606

Custom made Dispensaries and Medicine counters at

0% FINANCE

We can also offer you a total refit package using leading makes of
Shelving at Discount Prices

We will endeavour to beat any genuine quotation!

For a free Design Consultation contact:

Graham Carty, Interplan Retail Systems Ltd on
0733 320 353 (24 hrs)

Representatives in London, Peterborough, Leeds, Birmingham and Newcastle

STOCK FOR SALE

medielite plc

SPRING SPECIALS

PHOTOGRAPHIC LITHIUM BATTERIES

123 A	@	£1.99	Panasonic
2CR 5	@	£2.99	and
223 L	@	£2.99	Energiser

DURACELL BATTERIES

MN 1500 B4	@	£1.24
MN 2400 B4	@	£1.39
MN 1300 B2	@	£1.55
MN 1400 B2	@	£1.22

KODAK GOLD II FILMS

Up to 40% off Trade Prices

FUJI 3 FOR THE PRICE OF 2

FUJTRICN 24	@	£3.96
FUJTRICA 24	@	£4.31
FUJTRICH 24	@	£4.67

POLAROID OFFERS

636 Instant Camera @ £18.99
600/Image/SX 70/Vision Single Films @ £7.49
Polacolour 100s Silk Passport Film Value.
Pack @ £69.00 (£13.80 for each twin pack)
35mm High Definition 100 ASA 24 Exps @ 79p each

All prices are nett. Goods subject to availability E & OE

Medielite plc, Belvue Business Centre
Unit 16 and 17 Belvue Road, Northolt
Middlesex UB5 5QQ

Tel: 081 841 4144 Fax: 081 841 8390



LIBRA DISTRIBUTORS

KODAK FILMS AT BEST PRICES

GR100 SPEED 24exp at £1.46 39%
GR100 SPEED 36exp at £1.89 36%
GS200 SPEED 24exp at £1.69 35%
GS200 SPEED 36exp at £2.07 35%

WHILST STOCKS LAST
CALL FOR EXTENSIVE PRICE LIST

TELEPHONE: 081-445 4164
FAX: 081-445 1399

IDEAL TIME TO GET IN FOR PASSPORT
PICTURES — FOR A FREE DEMO CALL US.

STOCK WANTED

WANTED

Your redundant Noritsu, Fuji,
Oriental or just want to sell.

Then contact Fotofinish anytime

Tel: 0603 488 004 or 880 068

Businesslink

A FREE Service for Chemist & Druggist Subscribers

EXCESS STOCK

TRADE LESS 50%+VAT+POSTAGE - Syntopressin nasal spray x 12, Medrone 100mg, Provera 200mg. Tel: 0203 345606.

TRADE LESS 40%+VAT+POSTAGE - 25x5 Sandostatin amps 100mcg per ml (exp 5/98). Tel: 0792 850530.

TRADE LESS 30%+VAT+POSTAGE - Loron 520, Maxijul orange, Biotrol elite 36830, Filair 100, 60 & 40, Convatec S296, S241 and S246. Tel: 0702 75140.

TRADE LESS 30%+VAT+POSTAGE - 2 Pulmadil inhalers (exp 5/94), 1 Tilade mint (exp 7/94), 600 Ridaura (exp 4/95), 42 Feldene Melt (exp 9/94), 4x30 Provera 400 (exp 9/96). Tel: 0223 246535.

TRADE LESS 30%+VAT+POSTAGE - 9x10 Convatec Stomahesive flanges 57mm S272, 9x30 Combihesive closed pouches 57mm S266. Tel: 0322 526470.

TRADE LESS 50%+VAT+POSTAGE - 483 Chlorpromazine 50mg (exp 5/94), trade less 30%+vat+postage 60 Hexopal forte, 24 indomethacin supps, 56 Largacil 50mg, 22 Orudis 100mg, 141 Mycardol. Tel: 081-428 4373.

TRADE LESS 30%+VAT+POSTAGE - 207 Serenace 10mg, 28 Acezide, plus others. Tel: 0963 250259.

TRADE LESS 30%+VAT+POSTAGE - Diurexan, Haelan ointment, Climagest 1mg (exp 4/94), Haelan tape, Nuelin SA 250, Pro-actidil (exp 8/94), Antepsin, Avenityl 25mg, Hydrosaluric 50mg, 5 Becotide susp 10ml (exp 5/94 or 7/94), 2 Rhinolast 10ml, 400 Neo-Nalex-K, plus others. Tel: 081-989 0070.

TRADE LESS 40%+VAT+POSTAGE - 9x50 Creon 25000 (exp 8/94). Tel: 0444 412444.

TRADE LESS 50%+VAT - Profasi 5000 1x10 (exp 8/94). Tel: 081-902 1674.

TRADE LESS 30%+VAT+POSTAGE - 100 Asendis 25mg, 50 Asendis 50mg, 20 Heparin inj 5000 (preloaded syringes), 80 Pentazin 2mg, 132 Cystrin 3mg (exp 9/94, 30 Zofran 8mg, 80 Suscard buccal 5mg (exp 6/94). Tel: 0903 241442.

TRADE LESS 50%+VAT - Buyer collects 7 new oxygen stands for steel cylinder, NPA MRP £15.40+vat each. Tel: 081-684 1352 Croydon.

TRADE LESS 35%+VAT - Suscard buccal 5mg, Tryptizol caps 15mg, Tarivid tabs 200mg. Tel: 091-536 4640.

TRADE LESS 50%+VAT - 216 Loron 400mg. Tel: 0252 543240.

TRADE LESS 50%+VAT+POSTAGE - 2x100ml Lomotil liquid (exp 7/94), 21 Feldene Melt 20mg tabs (exp 8/94), 83 Hormonin tabs (exp 8/94), trade less 40%+vat+postage - 58 Grisovin tabs 125mg (exp 11/94), 30 Inderal tabs 40mg (exp 9/94), 25 Hypovase 2mt tabs (exp 11/94), 30 Corgard 80mg tabs (exp 7/94). Tel: 081-684 1352.

TRADE LESS 40%+VAT - 3x3mu Wellferon amps (exp 10/94). Tel: 0922 477784.

TRADE LESS 30%+VAT - 18 Tilade mint inhalers (exp 5/94), 6 Tilade Syncroner (exp 5/95). Tel: 0533 359120.

TRADE LESS 20%+POSTAGE - 300 Pentasa 500mg. Tel: 021-557 5903.

TRADE LESS 30%+VAT+POSTAGE - 2x10x1ml Depixol conc 100mg (exp 9/95), 20x10ml Bricanyl resp solution (exp 7/94), 86 Pondocillin tabs (exp 10/94). Tel: 021-458 1097.

TRADE LESS 30%+VAT+POSTAGE -

1x7 Diflucan 50, 1x7 Diflucan 200mg (well dated), 2 boxes Biotrol elite 32-835, 2 boxes Biotrol 32-825, 2 boxes Conven 5062. Tel: 0232 381882.

TRADE LESS 30%+VAT+POSTAGE - 96 Celance 250mg, 45 Provera 400, 60 Ridaura Tiltab 2mg, 30 Progenil, 135 Orad 4mg, 494 Nozinan 25mg. Tel: 0232 612825.

TRADE LESS 40%+VAT+POSTAGE - 20x50 Creon 25000 caps. Tel: 0279 654172.

£30 PER 100 INCLUSIVE - Danol caps 200mg (well dated). Tel: 0548 830215.

TRADE LESS 30%+VAT - 100 Parlodel 5mg (exp 9/97), 96 Nutrizym GR (exp 5/96), 20 Surgicare S242, 30 Colodress plus S861. Tel: 0292 263973.

TRADE LESS 28.6%+VAT - Hydroxocobalamin injection 1000mcg Cobalin-H £4.85 (exp 8/98), minimum 50 boxes. Tel: 0352 752050.

TRADE LESS 30%+VAT+POSTAGE - 100 Theo-dur 200mg (exp 6/94), 100 Mysteclin, 100 Isordil 30mg tabs, 89 Danazol 100mg, (all exp 9/94), 100 Symmetrel 100 (exp 8/94), 56 Norval 30mg. Tel: 0903 784878.

TRADE LESS 30%+VAT - 4x56 Pranoxen 500mg tabs (exp 8/94). Tel: 0702 544104.

TRADE LESS 50%+VAT+POSTAGE - 185 Bonefos 400mg caps (exp 9/94), trade less 40%+vat+postage - 1x60 Intal nebuliser solution (exp 7/94), 40 Hydromet tabs (exp 7/94), 28 Motipress tabs (exp 10/95), 65 Phyllocontin paed tabs (exp 8/94), Albustix strips (exp 10/94). Tel: 081-767 6005.

TRADE LESS 50%+VAT - 1x10 Metrodin 75iu (exp 3/96). Tel: 071-935 3051.

TRADE LESS 15%+VAT+POSTAGE - Didronel tabs 200g. Tel: 071-620 0429.

TRADE LESS 25%+VAT - 16x28 Lipostat 20mg tabs (exp 10/95). Tel: 081-570 8944.

FOR SALE

PARK PMR LABELLING SYSTEM - Perfect working order, fully updated £500 ono. Tel: 051-677 2241.

COMPUTER LABELLING SYSTEM - Labelling software, computer printer, tv monitor, £200, buyer collects. Tel: 071-736 4126 (London SW6).

PMR JOHN RICHARDSON SYSTEM - £500. Tel: 0533 464131.

GOLF HALF SET - with bag, good condition £40. Tel: 0703 322458 Southampton.

RICHARDSON SANYO LABELLING SYSTEM - In good working order, virtually new keyboard, best offer over £300. Tel: 0352 752050.

SANYO 10 DEPARTMENT TILL - Excellent condition, programmable, 99 price look ups, offers around £175. Tel: 0663 750596.

WANTED

ZOLADEX - Sandimmun oral solution, Desmospray, Recormon 2000, good price paid. Tel: 081-539 1922.

EPOS SYSTEM - Any make considered. Tel: 071-328 0502

IMIGRAN INJECTION - (Old system) offering trade less 30%, refill packs or complete with auto injector. Tel: 06487 62653.

SHORT OR OUTDATED PROCESSABLE 35MM & 110 - Print or slide films or

others, cash offer. Tel: 081-427 1454.

NOMAD MONITORED DOSAGE SYSTEM - Trays, cassettes, trolleys, etc. Tel: 0693 830261.

PORTABLE OXGEN SET - For patient, must be excellent condition, prefer 260 size, £100-£120. Tel: 0384 77555

PAGEN PERFUME - 1.5ml and 3.0ml. Tel: 0482 501792.

ACCOMMODATION

NORTHUMBRIA - Self catering, new house near Holy Island, centrally heated, sleeps 6 plus cot, bargain breaks available. Tel:

0302 886059 after 7pm.

PORTUGAL - Estoril apartment sleeps 4-6, sea views, swimming pools, close to all facilities, casino, golf courses and beaches. Tel: 0669 20285.

CENTRAL LONDON - 2 bedroom flat, for short holiday let or even short term locum let, available up to six months from end of April. Tel: 0702 710612/73718.

COSTA BLANCA - Apartment sleeps 4/5, select resort, sandy beaches, lovely sea views, all amenities close by, May to September, from £100 pw inclusive. Tel: 061-794 8243.

IMPORTANT

Because demand for free "Business Link" entries exceeds the space available, subscribers are asked to comply with the 30-word limit. To avoid delay in publication, please ensure that brand and drug names have the correct spelling and that the text is legible.

Free entries in "Business Link" (maximum 30 words) are restricted to community pharmacist subscribers to *Chemist & Druggist*. No trade advertisements will be permitted. Acceptance is at the discretion of the Publishers and depends upon space being available. Send proposed wording to "Business Link" using the form printed below.

EXCESS STOCK CAUTION: Pharmacists are responsible for the quality, safety and efficacy of medicines they supply. In purchasing from sources other than manufacturers or licensed wholesalers, they must satisfy themselves about product history, conditions of storage and so on.

To: Business Link, CHEMIST & DRUGGIST, Benn House, Sovereign Way, Tonbridge, Kent TN9 1RW.

PLEASE COMPLETE IN BLOCK CAPITALS

Surname

First names

Address

. Postcode

Personal RPSGB Registration number

Telephone number

Proposed advertisement copy (maximum 30 words)

.

.

.

.

.

To be included under section Heading

Signed Date

Aboutpeople

New Guild president

Mr Arthur Williams, chief administrative pharmaceutical officer at Grampian Health Board, is the new president of the Guild of Hospital Pharmacists. He takes over from Mr Ron Pate who has held the position for two years.

The new officers elected at the Council meeting, held before the National Weekend School in Liverpool, are: vice-president, Mr Chris Cairns; treasurer (newly created post), Mr Peter Cooke; and editor, Mr Gerard Lee.

Ron Pate, V'lain Fenton-May, Helen Remington and Peter Cooke were re-elected as national members. Chris Cairns was newly elected as a national member and Sean Jones as a district member.

The chairs of the committees are: Terms and Conditions, Mr V'lain Fenton-May; Education



Mr Williams — new GHP president

and Science, Mrs Margaret Dolan; Organisation Committee, Mr Anthony Oxley; and Practice, Mrs Gillian Arr-Jones.

Mr Robert McCartney was co-opted to Council.

Mr Ian Simpson has been appointed as professional secretary of the Guild, working on a part-time basis.

Appointments

Glaxo Holdings are making a number of changes to their board and senior management. **Sean Lance**, executive director, will take responsibility for Eastern Europe, Scandinavia, Belgium, Holland and Latin America. **Jacques Lapointe**, president and chief executive officer of Glaxo Canada, is appointed managing director of Glaxo Pharmaceuticals UK. **Gian Pietro Leoni** is appointed managing director of Glaxo SpA.

Michael Ward has been appointed finance director at Lloyds Chemists. He was previously employed as group finance director at HP Bulmer Holdings.

Richard Finn has been appointed managing director of the Yardley Lenthieric Group. Formerly president and chief executive officer of US-based Cheeseborough Ponds, Mr Finn

succeeds Randall Weisenburger, chairman of Yardley's board, who has been serving as interim managing director since September 1993.

Wella are strengthening their sales operation with the appointment of **Rob Hollins** to the newly-created position of general sales manager. Mr Hollins was formerly national account controller with Bristol Myers.

Jason Leverett has been appointed Swains' East Anglian sales manager for the pharmacy market.

Brad Walker is leaving his position as managing director of Pretty Polly to take up an executive position with Sara Lee's hosiery operation in the USA. His successor, **Allan Falconer**, will take up the post on May 1. He is currently group managing director for South African Hosiery, also a Sara Lee subsidiary.

AAH Pharmaceuticals have appointed the first of a team of EPoS implementation managers for their Link pharmacy computer systems. **Jo Evan** will cover the North West and North Midlands, supporting the Link sales team as well as installation and training company Granada Microcare.

As a result of a review of Wellcome's R&D process, the company has appointed **Dr David Barry** as group director, research development and medical affairs from May 1. Based at Beckenham and reporting to chief executive Mr J. Robb, he will assume responsibility for Wellcome's entire R&D programme. Existing R&D organisations in the UK, USA and Japan will be merged into a single global structure.

Nielsen have appointed **Steven Rothermel** as the new client sales and service vice-president for the British Isles. Prior to this position he held a similar position within the US operation.

The Guild of Hospital Pharmacists has appointed **Ian Simpson** as the first paid professional secretary to the Guild. **Magaret Dolan** is to be the GHP secretary for Scotland.

New BPSA executive elected

The new executive of the British Pharmaceutical Students' Association was elected at the 52nd annual conference, held in Liverpool. The elected officers are as follows: president, **Chris Poole** (ex-Aston); secretary general, **Fiona Madden**; treasurer, **Garwyn Morris**; public relations officer, **Nicola Hill**; membership secretary, **Catriona Johnston**; pre-registration officer, **Lynn Morris**; sports officer, **Martyn Clarke**; Pennine area co-ordinator, **Karen Wilson**; Eastern area co-ordinator, **Emma Green**; Western area co-ordinator, **Robert Ford**; skiing officers, **Stephen Doyle** and **Bronagh Killen**; undergraduate publications officer, **Conor O'Reilly**; graduate publications officer, **Nick Warren**; chairman of the organising committee, **Grant Earham**; and chairman of the sports organising committee, **Philip Wragg**.

Honorary life membership was awarded to the outgoing president of the BPSA, **Gianpiero "Jammy" Celino**; outgoing secretary general, **Sharon Johnson**; **Sharon Hart** and **Raj Gokani**.



Sally Hearn of Bradford School of Pharmacy was the winner of the BPSA Janssen patient counselling competition. In a video presentation she successfully counselled a confused patient on the salient aspects of his medication. She is shown (right) receiving her prize from Jill Grenville, Janssen national accounts manager, at last week's BPSA conference



Illegal imports

Colgate Great Regular Flavour and Colgate Blue Minty Gel toothpastes are manufactured and sold in the UK in accordance with the requirements of Medicinal Product Licences PL0049/0020 and PL0049/0021 respectively.

The Medicines Act 1968 provides that no person shall sell or supply or procure the sale or supply of a medicinal product other than in accordance with the provisions of the Product Licence.

The Act specifically states "No person shall import any medicinal product except in accordance with a product licence".

Products manufactured overseas and imported into the UK are unlikely to be in accordance with the terms of the Product Licence granted and therefore cannot be sold in the UK without putting the seller in breach of the law. Section 7 of the Medicines Act 1968 refers.

Over the last several years, Colgate have dealt severely with importers who sell products which are not manufactured in accordance with UK requirements and will have no hesitation in reporting to the Authorities any products which infringe the terms of the above mentioned product licences.



COLGATE-PALMOLIVE LTD



KEEP THE THREE HAZARDS OF HEARTBURN AT A SAFE DISTANCE

Heartburn can be caused by not one, but *three* hazardous agents **acid, bile and pepsin.**

But with the special action of **Gaviscon** you can steer **4 out of 5** customers clear of the pain.^{1,2,3}

Gaviscon gives **3 in 1** protection by forming a *physical alginate barrier* over stomach contents to keep acid, bile and pepsin *away* from the sensitive oesophagus lining.

But unlike Gaviscon, some heartburn remedies only act on acid –

leaving the oesophagus exposed to irritation and damage from refluxing bile or pepsin.

Protect your customers from the three hazards of heartburn. Recommend **Gaviscon.**



GAVISCON

3 in 1 protection against heartburn

Product Information. Active Ingredients: Liquid Gaviscon Sodium alginate BP 500mg, sodium bicarbonate Ph Eur 267mg, calcium carbonate Ph Eur 160mg per 10ml dose. Gaviscon 250 Tablets: Alginic acid 1250mg, sodium bicarbonate Ph Eur 85mg, aluminium hydroxide gel BP 50mg, magnesium trisilicate Ph Eur 12.5mg per tablet. **Indications:** Liquid Gaviscon Heartburn, including heartburn of pregnancy, dyspepsia associated with gastric reflux hiatus hernia and reflux oesophagitis. Gaviscon 250 Tablets Heartburn and acid indigestion. **Contra-Indications:** None known. **Dosage Instructions:** Liquid Gaviscon: Adults and children over 12 10–20ml, children 6–12 5–10ml liquid after meals and at bedtime. Children under 6: Not recommended. Gaviscon 250 Tablets: Adults and children over 12 2 tablets to be chewed thoroughly as required. Children under 12 Not recommended. **Note:** 10ml liquid contains 6.2mmol sodium. One Gaviscon 250 Tablet contains 1.02mmol sodium. Both liquid and tablet forms of Gaviscon are sugar-free. **Retail prices:** 100ml £1.60, 200ml £2.86, 24 tablets £1.95. **Product Licence Nos:** 44/0058 Liquid Gaviscon, 44/0140 Peppermint Flavour Liquid, 44/0103 Gaviscon 250 Tablets, 44/0143 Lemon Flavour Tablets. **Legal Category:** GSL. **Product Licence Holder:** Reckitt & Colman Products Limited, Dansom Lane, Hull HU8 7DS. GAVISCON is a registered trademark. **Date of preparation:** 30/12/93. **References:** 1. Chevrel B. (1980) *J. Int. Med. Res.* 8: 300. 2. Ward A.E. (1989) *Br. J. Clin. Pract.* 43: (2) Suppl. 66 52. 3. Williams D.L. et al. (1979) *J. Int. Med. Res.* 7: 551.

RECKITT
COLMAN
PRODUCTS